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ABSTRACT

This handbook presents a comprehensive self-study and evaluation visit format for institutions seeking candidacy, initial accreditation, or reaffirmation of accreditation. It is designed to be used by members of evaluation teams visiting institutions that have completed the comprehensive self study or an interim report with a required limited visit. Section 1 of the comprehensive evaluation visit discusses: (1) roles of the accrediting commission, the evaluator, and the team chair; (2) the evaluation site visit; (3) the evaluation report; and (4) responsibilities after the visit. Section 2 outlines procedures for interim and midterm visits. The handbook addresses editorial concerns, facilitates team member preparation, guides self-study analysis, and suggests sample evaluation questions. Primary roles of the accrediting commission include: (1) communication with the institution; (2) team and team chair selection and training; (3) provision of materials from ACCJC; (4) supplementing self studies; and (5) coordinating multi-college districts. Appendices A through G contain a confidential recommendation form, glossary of commission actions and definitions, commission policies, and eligibility requirements. (AS)

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Handbook for Evaluators

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Accrediting Commission for Community and Junior Colleges
Western Association of Schools and Colleges

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HANDBOOK FOR EVALUATORS

Accrediting Commission for Community and Junior Colleges
Western Association of Schools and Colleges

3402 Mendocino Avenue
Santa Rosa, CA 95403

Telephone: (707) 569-9177
FAX: (707) 569-9179

1997

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INTRODUCTION

This Handbook is designed to be used by persons serving as members of evaluation teams visiting institutions that have completed the comprehensive self study or an interim report with a required limited visit. The comprehensive self study and evaluation visit format described in this Handbook is used by all institutions seeking candidacy, initial accreditation, or reaffirmation of accreditation.

Private non-governmental accreditation rests on a model of evaluation which involves both internal and external review of an institution. The accreditation paradigm includes the following elements:

- standards of good practice which are accepted by the member institutions
- internal, comprehensive self study by the institution at periodic intervals
- assessment of the self study and the institution against the standards by external, peer reviewers with recommendations to the institution and the Commission
- decision by an independent Commission regarding the accreditation status of the institution
- follow-up by the institution to address challenges and opportunities identified in the evaluation processes.

The evaluation team, all professional peers who volunteer their services, offer independent insights based on careful analysis of the self study and an on-site evaluation. The team

1. Confirms and validates many of the conclusions of the self study.
2. Calls attention to problem areas inadequately recognized by the college itself.
3. Assures the Commission that the institution has been responsive to recommendations of previous visiting teams and has developed sound evaluation and planning procedures involving assessment of student outcomes.
4. Reinforces and extends the college's commitment to its continuing pursuit of excellence.
5. Assures the Commission that the institution merits candidacy, accreditation, or reaffirmation of accreditation, or advises the Commission that the team cannot recommend such action.

Because of the importance of these judgments in maintaining the quality of education in all institutions, the report to the institution and to the Commission deserves the best efforts of the evaluation team. Team members have a special responsibility to maintain the integrity of the accreditation process and outcomes which enables private, nongovernmental accreditation to meet its goals. Quality assurance to the public and institutional improvement for institutions can only be achieved through the conscious commitment of all who participate.

Voluntary accreditation at relatively low cost is made possible by the cooperation and unpaid efforts of hundreds of people who serve on evaluation teams. The counsel of outside evaluators is invaluable to the institution visited; moreover, the visitors themselves and their colleges benefit from new insights that result from the visit.

SECTION ONE

THE COMPREHENSIVE VISIT

I ROLE OF THE COMMISSION, THE EVALUATOR AND THE TEAM CHAIR

A THE ROLE OF THE ACCREDITING COMMISSION

1. COMMUNICATION WITH THE INSTITUTION: About two years before the anticipated date of the evaluation visit, the Commission office advises the institution of the upcoming visit and self study. The college is invited to select dates for the visit and to indicate any special expertise or experience they would like represented on the team.

2. TEAM CHAIR SELECTION: Invitations are sent to prospective chairs, who are experienced evaluators, representing the best professional practice. The chair may invite a non-voting assistant at no expense to the Commission. The remainder of the team is invited about six months to a year prior to the visit.

3. TEAM SELECTION: Commission staff develop the teams from a roster of experienced educators who have exhibited leadership and balanced judgment. Typically, a team has several faculty members, academic and student services administrators, a chief executive officer, a trustee, a business officer, and someone with experience/expertise in planning, research and evaluation. Each evaluator is chosen to bring perspective to the task, but none is a "representative" of an organizational constituency. Teams represent the profession.

Each team is selected to provide experienced, impartial professionals appropriate for the institution being evaluated, and to address any special concerns the college may have expressed. Colleges may ask for special expertise, but they may not request specific individuals. Teams are reflective of the racial, ethnic, and gender diversity of the college and the region.

The size and complexity of the institution being evaluated will determine the number of persons on the team. The Commission seeks a balance of experienced and first time evaluators, and each team includes persons with experience at institutions similar to the college being evaluated.

4. TEAM TRAINING: All first-time evaluators are required to attend a team training workshop prior to the visit. Any new evaluator who does not attend the workshop or receive an individual training session will be removed from the team and replaced. Although attendance for experienced evaluators is optional, our experience is that most evaluators attend the workshops each year.

5. MATERIALS FROM ACCJC: The Commission office sends copies of the previous team report, any interim reports and commission action letters to the chair and team. The chair also receives the most recent Annual Report and a summary of complaints against the institution. The college sends copies of the self study, catalog, and most recent class schedule to the team members and Commission 45 days before the visit.

6. UNSATISFACTORY SELF STUDIES: On rare occasions, a college may produce a self study which is so inferior that it is appropriate to consider whether or not the visit should proceed. In these instances, Commission staff consults with the team chair and the leadership of the college to determine a course of action. Among the possible outcomes of this review are a decision to proceed with the visit if an addendum and additional documentation are available at the time of the visit, a determination to postpone the visit and require a rewritten self study, or Commission negative action and rescheduling of the visit.

If determination is made that the site visit should be postponed, the Executive Director notifies the college and the team members and arranges for a new visit date. Commission staff assess the needs of the institution and the team to determine if a new team chair and team will be required.

7. MULTI-COLLEGE DISTRICTS: Care should be taken to coordinate meetings and interviews with District representatives or the Board to maintain efficient use of time and resources. The college is the main focus and care must be taken to preserve the integrity of the college evaluation while recognizing the dynamics of a district or system context.

B ROLE OF THE EVALUATOR

The evaluation team member, in concert with other members of the team, provides an independent peer review of an institution. The team prepares a report for the institution's use which analyzes the adequacy of its resources, the effectiveness of its procedures, and the quality of its performance in pursuit of its stated goals. The team seeks to validate quality and integrity and to inspire continuous improvement of institutional performance.

The task of the evaluator is that of the colleague who shares commitment to professional excellence, not that of the inspector conducting a compliance review. The evaluator makes diagnostic recommendations, helping the institution to identify and deal with significant concerns. The evaluator looks for coherence between what the institution says and what it does. The evaluator is scrupulous about accuracy and fairness.

Conflict of Interest

The Commission takes special effort to maintain the integrity of the accreditation evaluation process. To this end, evaluators are expected to disclose any possible conflict of interest before accepting an assignment. Commission policy identifies the following conditions under which an evaluator should decline an invitation to serve or ask for an assignment to another team. As prescribed by the Commission policy on conflict of interest, the Commission will not knowingly invite or assign participation in the evaluation of an institution anyone who has

- any current, or prior employment at the institution being evaluated within the last five years;
- any candidacy for employment at the institution being evaluated within the last five years;
- any current, or paid consultancy or other business relationship at the institution being evaluated within the last five years;
- employment in an institution or district bordering the institution being evaluated within the last five years;
- personal or financial interest in the ownership or operation of the institution;
- close personal or familial relationships with the institution.

Note: While the term institution refers primarily to the college being evaluated, prospective evaluators should apply the same tests to institutions which are part of a larger district or system. Community colleges in Hawaii are part of one University system. Hawaii community college staff may serve as evaluators for Hawaii colleges, but the Commission will seek to minimize any potential conflict of interest such as geographical proximity or area of residence.

A team member or chair who has any questions about possible conflict of interest should contact the Executive Director.

Expectations of Evaluation Team Members

Team members should approach the task understanding that the chief values to the institution come from a rigorous institutional self study and from the quality of the feedback from the team. Comments, suggestions, and recommendations made in the evaluation report should therefore be clear and specific without being unduly prescriptive.

Team members are expected to arrive on time and to be present continuously for the entire visit, including the chairperson's oral report to the college on the final day. Team members are expected to devote most of their time to the primary and secondary assignments assigned by the team chair.

Although efforts are made for team members to attend a number of classes, it is not possible to visit every class or meet with every member of the faculty. Since all, or many members of the faculty will have shared in the preparation for the evaluation visit, all should be aware of the presence of the evaluation team and have opportunities to communicate with team members.

During the visit, particular attention should be given to the extent to which the college has carried out or reacted to recommendations made in the most recent evaluation report. Team members should note carefully the sections in the institutional self study report that describe action taken on, or responses to, earlier recommendations. It is important to remember, however, that there may be instances in which the college has not agreed with a team recommendation. In such cases the college report should state the reasons for the disagreement. What the college cannot do is pretend that it never received the recommendation in the first place.

Above all else, there should be an attempt to evaluate the educational outcomes: what is happening to the students in the classroom, laboratory, and the college environment generally, and whether this is effective but also in line with the institution's purposes and objectives. The team should evaluate the institution's own evidence of institutional achievement.

ACCREDITING COMMISSION FOR COMMUNITY AND JUNIOR COLLEGES
Western Association of Schools and Colleges

A TEAM CAREFULLY SELECTED FROM OTHER COMMUNITY COLLEGES IS COMING TO EVALUATE US

PORTERFIELD STATEMENT

WHAT MUST IT DO?

Reach a decision as to how well, overall, our college is doing what colleges like us are generally expected to do.

Make a judgement as to how well, overall, our college is doing what it claims to do.

Point out to us, and the Accrediting Commission for Community and Junior Colleges, any notable strengths and weaknesses that could or do significantly affect the education of our students.

Recommend steps we might take to strengthen ourselves.

Evaluate the progress we have made in carrying out the recommendations of previous visiting committees.

Communicate its findings, judgements, and recommendations to the Accrediting Commission, which makes the actual decision on accreditation.

TO THIS END, WHAT WILL IT TRY TO DO?

Become as intimately acquainted with us as circumstances will permit.

Listen to any member of our college community (students or staff) who wishes to be heard. We must take the the initiative.

Answer any questions we have about accreditation.

Be helpful rather than punitive.

Assure itself that there has been widespread participation in our self study.

Encourage sound innovation.

Distinguish between limited and individual problems, which must be resolved in other ways, and general problems, which could or do significantly affect the teaching and learning that goes on here.

WHAT WILL IT NOT TRY TO DO?

Visit every class or confer with each staff member, because time does not permit.

Resolve all of our problems. It can't.

WHAT WILL IT TRY NOT TO DO?

Let the biases of individual team members affect its evaluation of us or lead to witch hunting.

Be picayune or become embroiled in intramural conflicts.

Usurp or interfere with the normal functions of faculty senates, professional organizations, the administration, or the governing board.

Prepared by John H. Porterfield, Retired Member of the Teaching Faculty, Diablo Valley College and Former Member, Accrediting Commission for Community and Junior Colleges

C. ROLE OF THE TEAM CHAIR

The chairperson organizes the evaluation visit, makes necessary arrangements for the team, speaks for the team, and writes the final team report. Prior to the visit the chair contacts the institution and members of the team to ensure that needed resources will be available and that members are appropriately assigned. During the evaluation visit the chair organizes team discussions, sees that all necessary contacts are made, sees to the needs of the team, and assures that the limited time of the team is used effectively. At the conclusion of the visit, the chair conducts a final open meeting with members of the college staff. At this meeting the chairperson reports the major findings and recommendation of the team.

PRE-VISIT: The pre-visit to the college by the team chair is an important aspect of the comprehensive visit. Several months may have passed since the self study was completed, and major changes may have occurred which will materially affect the course and conduct of the site visit. Visiting the college gives the team chair the opportunity to establish personal relationships with key individuals, get a sense of the physical layout of the team room, and to begin logistical arrangements for the team, including assessment of computer hardware and software needs. The pre-visit also provides the college with a clearer sense of what the team will need and the opportunity to correct any deficiencies the team chair may note.

CORRESPONDENCE WITH THE TEAM/INSTITUTION/ACCJC: The team chair corresponds with the team members to welcome them to the team, to complete the Team Survey, make assignments to cover standards, provide information about travel and housing, indicate the team schedule, and generally set the tone of the entire visit. Contact with the institution begins with discussion of the logistics of a pre-visit.

MANAGER OF THE SITE VISIT: The team chair is responsible to the Commission for the successful completion of the evaluation site visit. In this capacity the team chair guides the team during the visit, insuring that the institutional outcomes are assessed in light of the institutional mission and that team members have the support necessary to complete their assignments.

AUTHOR OF THE TEAM REPORT: The team chair writes the final report, based on the information provided by team members in their written reports to the chair. When these team member reports are well written, the chair can often use major portions in the final report. However, team members should understand that the team chair is expected to produce a coherent, unified account of the team findings. In doing so, the team chair has considerable editorial latitude in constructing the final report.

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II. THE EVALUATION SITE VISIT

The evaluation site visit is the culmination of an arduous, time-consuming, and expensive activity on the part of the institution being visited. While the greatest value to that institution rests within the self study process, evaluators need to be sensitive to the impact of their presence on the multiple internal and external publics and stakeholders who interact with the college.

For evaluators, the team experience provides an opportunity to make a professional contribution which is not duplicated by any other experience. Working together with a group of colleagues, evaluation team members are able to become part of the life of an institution in a very special way.

Accreditation evaluations are about judging and about helping. The teams have the responsibility to determine whether the institution taken as a whole meets or exceeds the standards of accreditation. They do this by careful review of the institutional self study and by conducting the evaluation site visit. Out of this review comes both the team's judgment as to the educational quality of the institution, and the Commission's assurance to the public that the college is meeting its educational purposes.

The team also has the responsibility to provide guidance to the institution in the form of recommendations. These recommendations may be formal, such as those instances where the institution is not in compliance with the standards of accreditation. In other cases, the recommendations may be in the form of advice to the institution contained in the body of the team report. In both situations, the purpose is that of improving the effectiveness of the institution.

This section outlines the important characteristics and processes of a typical evaluation site visit. While each visit has its own unique characteristics and context, there is a fairly predictable pattern of events.

OVERVIEW OF THE EVALUATION SITE VISIT

I. BEFORE THE VISIT

A. Information from the Commission Office

1. Invitation to serve on a team.
2. Notice of training workshop.
3. Team training workshop.
    a. Handbook for Evaluators.
    b. Handbook of Accreditation and Policy Manual.
    c. Eligibility Criteria.
4. Report of previous evaluation team (for reaffirmation visits).
5. Commission action letters (for reaffirmation visits).
6. Interim reports if applicable.
7. Team Roster.

B. Information from the institution--at least 45 days before the visit

1. Institutional self study.
2. Current catalog.
3. Current class schedule.

C. Information from the team chair

1. Introductory information and welcome.
2. Team survey for making primary responsibility assignments.
3. Team member analysis of self study report information.
4. Team schedules, logistical arrangements, and other matters of interest.

D. Team Member Activities before the Visit

1. Attend team training workshop (mandatory for new team members, strongly encouraged for experienced evaluators).
2. Read the Commission Handbooks and related materials.
3. Read the entire institutional self study and related materials.
4. Respond promptly to team chair requests for information and reports.
5. Prepare analyses of self study as requested by the team chair.
6. Prepare lists of individuals/groups with whom you will need to meet.
7. Prepare analytical questions regarding the self study.
8. Make appropriate travel arrangements.

II. DURING THE VISIT

A. The first team meeting

1. Arrive on time.
2. Bring appropriate reports or analyses, according to team chair instructions.
3. Discuss initial team reactions to the self study, identify common concerns or themes, determine team approach to institutional issues.

B. The first day

1. Attend opening meetings, campus tours as scheduled.
2. Become familiar with documents in the team room, examine those relevant to the areas of primary and secondary responsibility.
3. Schedule and conduct meetings and appointments, including evening and off campus locations.
4. Participate in team meetings as scheduled.
5. Confer with other team members as needed.
6. Determine validity of institutional response to previous recommendations.
7. Visit classes/centers as appropriate.
8. Begin team discussion of core institutional themes.
9. Organize findings of first day activity and identify issues/questions for second day focus.
10. Begin writing first draft of report to team chair.

C. The second day

1. Continuation of first day activities with special focus:
    a. Complete validation of areas not addressed the previous day.
    b. Pursue any issues if delegated by the team chair.
    c. Conduct cross-validation of evidence for which conflicting information is provided.
    d. Conduct careful evaluation of institutional evidence to support assertions made in the self study.
    e. Coordinate findings with other team members and those with shared responsibility.
2. Team meetings and discussion of core themes:
    a. Identify key team recommendations, including those which may relate to multiple standards and develop strategy to address.
    b. Confirm that all standards are being addressed.
    c. Develop framework for team report.
3. Team member written report:
    a. Complete draft of team member report.
    b. Formulate formal recommendations.
    c. Attend final open meeting and leave campus promptly.

D. The third day

1. Complete gathering final information or evaluation of evidence.
2. The final team meeting:
    a. Review team member findings, reports, and recommendations.
    b. Agree on major team recommendations.
    c. Turn in team member report to team chair.
    d. Agree on confidential team recommendation to the Commission concerning accreditation status.
    e. Sign confidential recommendation form.
3. Attend final open meeting and leave campus promptly.

III. AFTER THE VISIT

A. Send expense form to Commission office.
B. Review team chair's draft of the final report.
C. Complete the evaluation of the team chair and site visit report.

PREPARATION BY THE TEAM MEMBER

A. Communications from the Team Chair: Team chairs communicate with team members at several points before the visit. Individual team chair styles and the demands of each visit vary, but most evaluation visits follow a typical pattern.

Team chairs usually send a welcome letter outlining the nature of the visit. In some cases the team chair has already made a previsit to the college; in other instances the previsit is still to come. An initial request for information may accompany this letter. You may be asked to respond to questions such as:

--updating your biographical information, including current institutions, titles, phone, FAX, and e-mail addresses;

--information about your previous accreditation experience or professional experience;

--an indication of the standards for which you feel most comfortable taking primary or secondary responsibility;

--your familiarity with computer hardware and software, use of laptops, or other technological matters;

--any special needs or concerns, such as dietary preferences or mobility conditions;

--a picture, if the college has asked for one.

Whenever the team chair asks for a response or information team members should respond very quickly. In the case of the preliminary questionnaire, the team chair needs the information in order to make assignments for team member responsibility during the visit. Failure to respond promptly delays the organization of the visit and could be the basis for removal from a team.

B. Organizational and Logistical Concerns: The team chair or the team assistant if the team chair has elected to provide one, will contact team members to distribute information about the logistics of the visit. You should receive information about the day and time of the first team meeting and the location of the hotel in time to make appropriate travel arrangements.

C. Analysis of the Self Study: Institutions are expected to send the self study and required supporting documents to the team chair and members of the team at least 45 days before the site visit. Team members are expected to read and understand the entire self study and to prepare for the validation activities of the visit itself. The following are typical questions which team members should address in preparation for the visit.

ANALYSIS OF THE SELF STUDY

I. PREPARATION AND DOCUMENTATION

A. How was the self study developed, written, and edited?

1. What is the evidence of broad involvement by campus constituencies?
2. Is the nature and location of the documentation complete and clearly described?

B. Does the self study serve as an effective vehicle for evaluation of the institution?

1. Can an external evaluator use the self study to assess the integrity, quality, and effectiveness of the institution?
2. Can the self study be used to determine that the institution meets or exceeds the standards of accreditation?

II. QUALITY OF THE SELF STUDY

A. Responses to previous recommendations and Commission actions

1. Does the self study demonstrate satisfactory follow-up of the recommendations of the previous team?
2. If there have been Interim Reports, visits, Progress Reports, Substantive Change Reports, Midterm Reports or other Commission actions, have these been incorporated into the self study?

B. Evidence that the institution meets or exceeds the standards of accreditation

1. What examples are used to demonstrate that the institution meets accreditation standards?
2. How is institutional effectiveness assessed? How does the institution demonstrate that it is meeting its educational goals and objectives?
3. What is the evidence of systematic and effective institutional planning and evaluation?
4. Can the institution demonstrate that it continues to meet the Conditions of Eligibility?
5. Do the Planning Agendas for each standard and the summary of institutional plans present a coherent plan of action for the institution? Does the institution show how these plans will be incorporated into institutional decision making?

C. Themes and areas for further investigation

1. What concerns can be identified in the self study that should be considered by the team as a whole?
2. Are there areas which are missing or inadequately addressed?

THE SITE VISIT

1. Initial Meeting of the Visiting Team

The work begins the afternoon or evening before the first day of the scheduled visit with a team meeting. At this first planning session, the visiting team reviews assignments, examines supplementary materials, arranges the schedule, and discusses the self study report of the institution. Team members should come to this meeting prepared to summarize the key issues they have identified in their primary areas of responsibility, present drafts of questions for interviews, and share lists of those individuals or groups to be interviewed.

2. Meeting with Institutional Staff

Early in the visit the team meets with administrators, the self study steering committee, and other members of the college staff who were most involved in preparation of the self study report.

At the meeting:

a. The general plan of the visit is discussed with institutional staff.

b. Any general questions the team members may have about the institutional self study are clarified.

c. The chief administrator of the institution and appropriate staff provide assistance in arranging a schedule of meetings between team members and individuals or groups such as the governing board, faculty, administration, classified staff, students, and other persons.

This meeting may be followed by a brief tour of the campus, in order that team members may become familiar with the physical plant and the locations for campus appointments. Care must be taken that this be brief; campus maps made available to team members can aid greatly in orientation. An evaluation visit is a work assignment; hence, purely social functions or entertainment should not be part of the team visit. Evenings should be kept free for team meetings, writing, visits to classes, or attending board meetings.

3. Remainder of the Visit

a. Team members arrange conferences, make class visits, hold individual interviews, and attend team meetings scheduled by the team chair. Class schedules should be available and staff contacts arranged. Schedules of faculty office hours and telephone directories are helpful.

Each visit schedule includes one or more open sessions where any member of the college community may meet with team members on any aspect of the self study These are informal conversations, not large forums for formal presentations by special groups or special interests.

The self study includes certification that the institution continues to meet the Eligibility Requirements. In the Commission's experience, an institution which finds itself in serious difficulty often has eligibility issues in addition to standards of accreditation deficiencies. Evaluators need to review the institution in these terms. (Appendix G)

The team chair receives a summary of any formal complaints about the institution which have been received by the Commission. One or more team members may be asked to verify that any issues related to those complaints have been addressed. Occasionally, someone at the institution challenges the accreditation process, self study, or visit. Information about these matters should be brought to the attention of the team chair and the team as a whole.

Colleges are expected to summarize their planning agendas into a cohesive statement about the future of the institution. Evaluators need to assess the appropriateness of this summary, including the capacity of the institution to actually carry out what it proposes to do. The summary should clearly indicate how the planned activities will improve the institution as a whole. It should not be merely a "wish list" of items that some people in the organization think would be good to do.

b. Meetings of the evaluation team are held several times during the visit to summarize the work accomplished and to plan for the remainder of the visit.

c. In the late morning or early afternoon of the final day the team meets to review findings, and make final plans for the preparation of its evaluation report. At this meeting, decisions are made as to the team's confidential recommendation to the Commission and other major suggestions and comments which are to be discussed with the college and included in the evaluation report. Drafts of the individual team members' written statements on their assignments are due at this time. The team members also sign the confidential recommendation form. (Appendix, A, B, C)

d. The team chair meets with the chief administrative officer of the institution to review major team findings and to insure that the team has made no major errors of fact. The team's confidential recommendation to the Commission is not discussed.

The team holds a final open meeting with members of the college staff. At this meeting, the chairperson articulates the major findings and offers constructive suggestions from the team. Before this open meeting, the team chairperson reviews key recommendations of the team with the chief administrator of the college in order to avoid errors of fact.

Under no circumstances should the visiting team's recommendation concerning candidacy or accreditation of the institution be revealed. This recommendation must be acted upon by the Commission before the official outcome of the visit is determined.

The final meeting with the staff is the team's best opportunity to be of immediate service to the college while the entire evaluating process is fresh in the minds of all present. If the evaluation visit is to result in the greatest institutional value, quality feedback from the team is essential. The team chair speaks for the team at this meeting. Team members are expected to be present for this final oral report from the team chair, but the chair is the spokesperson for the team.

Team members should expect to depart immediately at the end of this meeting. Expressing thanks for assistance or enjoyment at meeting people or observing institutional activities is appropriate, but team members should avoid engaging in extended conversations about the visit.

4. Subsequent to the Visit

a. College and team review of the team report draft.

Following the visit and prior to the submission of the final report to the Commission, the team chairperson submits a draft of the report to team members for comment and to the chief administrator of the institution for correction of any factual errors. During this draft review period team members should reflect carefully on the team's message to the institution.

Communication between the institution and the evaluation team should occur through the team chair and/or the Commission office. Contacts by individuals from the institution or in the course of other professional activities should be referred to the team chair or the Commission office.

b. Expenses and reimbursements to evaluators.

The Executive Director is authorized to reimburse each evaluation team member for necessary travel, food, and lodging expenses. Members who represent a governmental agency and whose expenses are covered by the agency will not be reimbursed by the Commission. There is no honorarium paid to evaluation team chairpersons or members.

Evaluators receive expense forms as part of the packet of information from the Commission office. Team members make their own travel and lodging reservations under the direction of the team chair and are reimbursed after the visit. Personal expenses not identified on the expense form are the responsibility of the team member. Vouchers for public transportation and for lodging should be attached. Approval for rental cars must be secured in advance from the Executive Director.

c. Evaluation of the evaluators, the team chair, and the visit.

After the visit, the Commission evaluates the visit and each of the participants Each team member is asked to evaluate the team chairperson, the chairperson evaluates team members and the chief executive of the institution evaluates the team and the visit In this way, the Commission ensures a comprehensive review of the effectiveness of the evaluation process Appendix D contains the evaluation form used by team members.

SAMPLES OF EVALUATOR QUESTIONS

Much of an evaluator's time and energy is spent examining documents, meeting with individuals and groups, and conferring with other team members. Having a well developed set of questions prepared in advance saves time during the visit and increases the reliability of the evaluator's experience since similar questions will be asked of different people. The task of evaluators is to walk the line between solid preparation and flexible responsiveness to whatever situations may arise.

The sample questions which follow are intended to guide evaluators in thinking about the site visit. They are not a checklist to follow slavishly. They are not paragraphs of the team member's evaluation report. They are intended to move the conversation from perceptions and opinions to assessment and evaluation of the institution's outcomes.

STANDARD ONE
INSTITUTIONAL MISSION

1. Does the institutional mission statement reveal enough about the institution that an evaluator knows what the characteristics of the institution are, who its students are intended to be, and what outcomes it hopes to achieve?

2. Does the institution show how it uses the mission to drive institutional planning and decision making? For example, if new programs have been instituted, was there a discussion of mission before the decision was made to institute the program, and can the institution document this?

3. How does the institution document the utility of the mission statement. For example, has there been discussion of the content and use of the mission statement? When was the last revision? Who participated?

STANDARD TWO
INSTITUTIONAL INTEGRITY

1. Do the public documents such as the catalog and class schedule clearly communicate what is needed to know about attending the institution? Can a student determine what is necessary to attain a degree?

2. How does the institution determine its responsibilities to the public?

3. What does the institutional policy say about academic freedom? Do people know about it? Is it used?

4. What does this institution say about equity and diversity in its policies? Can they provide some examples where these issues drove decision making?

STANDARD THREE
INSTITUTIONAL EFFECTIVENESS

1. What processes are used to determine what data are important to the institution and should be collected? How is information moved from data collectors to information users and what use is made of it?

2. What measures are used to determine performance and progress relative to goals for students, programs, offerings, finances, and comparisons with other like institutions? How often are these reviews conducted and do they produce actions to improve performance?

3. What examples are there to show that changes in planning, research, and evaluation processes and activities have led to improvements in teaching and learning?

STANDARD FOUR
EDUCATIONAL PROGRAMS

1. What are the key measures used by the institution to demonstrate student academic performance? What are the recent trends in performance?

2. How does the institution determine the educational needs of students and what examples demonstrate understanding of those needs? For example, does the institution systematically assess the progress of different groups of students through the program(s)?

3. Do the educational programs match the educational mission and identified student population? What examples does the institution present to demonstrate this?

4. Does the institution have a coherent curriculum and do the courses of study demonstrate that coherence?

5. If the institution is part of a larger district or system, how are educational programs integrated throughout that system?

STANDARD FIVE STUDENT
SUPPORT AND DEVELOPMENT

1. How are changing needs for current and future students identified and monitored? For example, if the institution is engaged in distance learning, what analysis of student support and development needs has occurred?

2. What measures of student satisfaction drive decisions about student support and what examples are presented to demonstrate institutional performance in relation to institutional goals?

3. How is the use of support and development services, programs, and facilities monitored to understand their impact on student learning? For example, what evidence is available to demonstrate that academic counseling enhances student academic performance?

STANDARD SIX
INFORMATION AND LEARNING RESOURCES

1. How are information and learning resources integrated with educational programs for students regardless of program location or mode of delivery?

2. What information does the institution gather to use in making decisions about information and learning resources? What examples of this use of information can the institution provide?

3. What does the institution know about how information and learning resources are actually used by staff and students?

STANDARD SEVEN
FACULTY AND STAFF

1. How does the institution design, reinforce, and evaluate education and training for all categories of staff?

2. How does the institution create a flexible work force and encourage effective communication and work innovation?

3. How is a high level of faculty and staff performance and satisfaction determined and maintained? What facilities, services, activities and opportunities are available?

STANDARD EIGHT
PHYSICAL RESOURCES

1. What focus is placed on health and safety in the workplace? What examples identify initiatives in this area?

2. What examples demonstrate that facilities planning is integrated with educational planning?

3. How does the institution gather information from the users of physical resources and how does it use this information?

STANDARD NINE
FINANCIAL RESOURCES

1. What assessments are made of resource availability and expenditure requirements? How are internal and external stakeholders and communities involved?

2. What are the main types of data and information which are used to track fiscal performance of the institution? Who gets this information? What examples demonstrate its use to drive institutional decision making?

3. What does the institution do to plan for financial emergencies or other negative events?

STANDARD TEN
GOVERNANCE AND ADMINISTRATION

1. How do senior leaders, including the governing board, demonstrate their commitment to quality in teaching and learning?

2. How does the institution review the effectiveness of its administrative and governance processes and what examples show that all relevant players understand and commit to making them effective? For example, what examples are provided to show how the systems work effectively, and what examples demonstrate that the institution corrects deficiencies in these areas?

3. If the institution is part of a multi-college district system, how are divisions of system and institutional responsibility made? How are these divisions reviewed and modified?

FREQUENTLY ASKED QUESTIONS

WHAT DOES THE COMMISSION MEAN BY "VALIDATE" A SELF STUDY?

The institution has the responsibility to show that it meets or exceeds the standards of accreditation; therefore, accreditors use the term validation instead of investigate or audit to underscore the importance of the institutional self study as a primary source document for the evaluation visit. A team which validates the self study confirms that the assertions and evidence presented in the self study are in fact observable at the institution. The team is not on campus to conduct its own self study, nor is it there to impose compliance with any standards other than those of the Commission.

Team members should begin by understanding the meaning of the standards of accreditation. The self study represents the institution's understanding of its performance against those standards. Validating the self study consists of acquiring through interviews, meetings, direct observation, and examination of written evidence enough information to support a professional judgment that the institution meets or exceeds the standards.

HOW DO I "CROSS-VALIDATE"? WHAT HAPPENS IF I GET CONFLICTING VERSIONS OF AN EVENT?

In any college there may be differences about what the facts are, about how the facts should be interpreted, and about what values the facts represent. In a good self study, these differences will be forthrightly addressed without pressure to reach a false consensus just to make the college look good. Just as validation involves a special type of assessment, cross-validating asks you to confirm that the information you receive, from whatever source, is generally correct, and not just the opinion or point of view of one individual or group.

Some may attest that the information was not allowed to be in the self study, some may suggest alternative interpretations are more appropriate, some may not appear to be credible witnesses on the surface, and others may try to use their cloak of office to give more credence to their statements. Team members should verify through subsequent meetings and discussions whether or not the information is generally reliable.

HOW DO I ORGANIZE ALL THIS INFORMATION WHICH COMES FROM SO MANY SOURCES?

The best way to organize the information is to be fully prepared. That means careful reading of the entire self study, understanding of the standards and policies in the Handbook of Accreditation and Policy Manual (1996 edition), development of a strategy for meeting with individuals and groups, and thinking about the report before the visit ever starts.

Once the visit starts, you will be literally bombarded by hundreds of bits and pieces of information. One way to organize the material is to prepare a report template of the standards for which you have primary and secondary responsibility, using the report format guide in this Evaluator Handbook. As you read the self study, make brief notes and indicate any questions you have. Fill in your template with information gathered from the interviews and meetings as your observations and analyses. As you work through the visit, you will be able to see quickly what areas remain to be covered, what areas need further work, and what areas are complete. When you complete an area, begin drafting your report to the chair for that section. You can always go back and change it as new information becomes available to you.

WHAT DO I DO IF I FIND AN ISSUE THAT ISN'T DISCUSSED IN THE SELF STUDY?

Remember that the self study may have been printed as much as four months before the visit. By definition, it is always a record of the status of the institution at that time. On the other hand, institutions do not stand still, waiting for the evaluation team to arrive. Your team chair makes a previsit to the college shortly before the team visit and will brief you on any important events to that date. Even with this information, more recent developments may be pertinent to the team's work. There have even been cases where the course of events has rendered much of the information in the self study irrelevant, or at least very much out of date. The institution also has a responsibility to provide important new information, especially if that information contradicts that found in the self study. Often this takes the form of an update to the self study document.

The first level of assessment should be to ask yourself whether the topic is an accreditation issue. In this situation refer to the standards for information. You should certainly discuss the matter with the team chair. If the issue does not seem to be covered by one of the standards, discuss the matter with the team as a whole at the next team meeting. The team decides how to deal with it.

If the situation is such that the institution should have provided more current information to the evaluation team, then the team has the opportunity to comment on that in the report.

HOW SHOULD I HANDLE INFORMATION THAT RELATES TO STANDARDS FOR WHICH I DO NOT HAVE PRIMARY OR SECONDARY RESPONSIBILITY?

Take note of the information and its source, get copies of any printed information, and take the information back to the team chair and team as a whole so the person with that responsibility can use it. You don't have time to go off on a tangent, but you do have a responsibility to gather useful information for your colleagues. At the same time, if you have not been able to validate some of your own areas, don't forget to ask your fellow team members if they have come across information that you need.

HOW SHOULD I RESPOND TO THOSE WHO ASK ME TO DECIDE WHO IS RIGHT AND WHO IS WRONG ON AN ISSUE?

There have been instances when individuals or groups on a campus believed that the purpose of the visit was to settle all the disputes or disagreements present at the time of the visit. As tempting as it may be, expressing an opinion favoring one side or the other jeopardizes the independence and credibility of the team's work.

Politely, but firmly, remind the person or group that the standards of accreditation are the basis of the team's assessment and that it would be inappropriate for the team to interject itself into an individual or group dispute. This issue is especially delicate in individual personnel issues, or issues where there may be legal action. Refer to the Commission policies on matters under litigation in the Handbook of Accreditation and Policy Manual, 1996 edition.

HOW DO I WRITE MY REPORT SO IT SOUNDS LIKE A TEAM EFFORT?

The overall style and tone of the report is very important. Team members are collegial, peer reviewers, not external inspectors. At the same time, the team has the responsibility to point out to the institution areas where the institution should address improvements and issues which indicate that the institution does not meet the Standards of Accreditation. The following examples are intended to provide guidance for the writing of the report.

The Evaluation Team Report is an important document in that it is the vehicle by which critical judgments about institutional performance and quality are expressed by the Western Association of Schools and Colleges, and through which formal advice about improvement is given. The report must be a credible and excellent document to have the desired effect. Consider:

- The document is analyzed in detail by the staff and members of the Accrediting Commission in reaching decisions about the status of the subject institution.

- The Report is read by faculty, administrators and trustees of the subject institution.

- The Report has a life of six years, in that the institution must respond to recommendations in its Midterm Report and the following comprehensive review.

- The Report is permanently filed at the college and the Accrediting Commission's office. It may be examined by researchers, job applicants at the institution may request copies, and government agencies or the courts may subpoena them.

III. THE EVALUATION REPORT

The team report is a statement of the views and findings of the evaluation team that visits an institution. Each member contributes a draft covering their assigned standards which are submitted to the team chair before the conclusion of the visit. The final report, however, is not merely an edited compilation of segments prepared by team members. It is a coherent statement of evaluation, written by the chair.

The main purpose of the evaluation report is to help an institution determine how effectively it is achieving its stated goals and objectives. To achieve this purpose the team report should be clear and specific and the source of evidence for each recommendation should be noted. The recommendations contained in the report represent the observations of the team at the time of the visit. Recommendations should be considered in light of the institution's educational objectives.

Preparing the Evaluation Report

Each team member, before leaving the campus, submits a written statement to the chairperson. As soon as possible after the visit, the chairperson prepares the entire report, drawing upon the material submitted by the team members. The chairperson is not limited to merely editing segments written by team members.

The chair is responsible for writing a clear, concise, well-organized and coherent document that will stand up under the careful scrutiny of a wide variety of readers. The report honestly reflects the views of the team and indicates any significant disagreements within the team. The evaluation report is not usually a long document. It sets forth the limitations and difficulties which the institution is experiencing and the plans and potential it has for overcoming them.

The Commission emphasizes that the time of the members of the visiting team and that of the institution is wasted and the function of the accreditation program defeated if the team glosses over or ignores problems. The report does not include long descriptions of what the institution already knows. The report should be frank and constructive.

A. Guidelines for the evaluation report

1. Evaluate the institution in light of its own stated mission, objectives, and Commission standards. The wide variations in the capabilities, interests, needs, and circumstances of students require corresponding variations in the institutions serving them.

2. Make favorable comments when commendation is due, without assuming it necessary to find a point of weakness to counterbalance each item of praise.

3. Remember that the purpose of the report is both to justify the recommendation on candidacy or accreditation and to provide a fair and useful estimate of the effectiveness of the institution. Just as the Commission asks institutions to provide evidence for their assertions of quality and effectiveness, teams are expected to provide evidence to support their recommendations.

4. Concentrate on fundamental issues. Of prime importance will be the sections which respond to the institution's stated objectives and which furnish evidence of outcomes and the effectiveness of the educational process.

B. Elements Which Should Not Be Part of the Final Report

1. Do not name individuals, either in praise or blame. Comment, if necessary, on the office, not the officeholder.

2. Do not advocate your own pet educational theories or those of other team members. This is not the place for special interests.

3. Neither advocate for nor advise against specialized accreditation. Program specific accreditation is an institutional matter. The results of specialized accreditation should be given due regard, and may be used by the institution as part of the supporting evidence included in the self study.

4. Do not cite the formulas or requirements of legislative statutes, specific organizations or associations, governmental departments or other agencies. The requirements of these agencies are often essential to the institution, but the Commission is not their enforcement agent. If an institution has adopted such standards as its measures of quality or effectiveness, it is appropriate to cite them as evidence presented by the institution in forming a judgment about overall institutional quality.

5. Never reveal in the report the team's recommendation for Commission action on candidacy, accreditation, or reaffirmation. Since the team does not make the final decision, confusion and embarrassment may result if a team's recommendation is revealed and is later modified by the Commission.

6. Avoid lavish praise or bitter criticism. Firm language may be used if needed, but not as satire or condemnation.

7. Avoid, if possible, a complete reversal of recommendations made by the previous team. Sometimes a team feels that a previous team's recommendation was unwise or inappropriate, but, if an institution has attempted to comply with that recommendation, it would be unfair to the institution and a discredit to the accreditation process if a reversal is too abruptly advised. In such cases a diplomatic way must be found to advise the institution toward the better course without creating confusion.

8. Avoid making gratuitous or trivial recommendations. Do not make specific suggestions to remedy problems. A brief diagnostic statement of the problem, linked to the appropriate accreditation standard is usually sufficient, leaving the specific remedy to be worked out by the institution.

C. Editorial concerns

In preparing the written report for the team chair, consider the following:

- Internal consistency: Does the report hang together, with no mixed or conflicting messages?

- Clarity: Does the report say exactly what is intended, so that there can be no accidental or deliberate misinterpretation?

- Perspective: Does the report language clearly represent the observations, conclusions and recommendations as coming from the team as a whole, not just one member or point of view?

- Institutional focus: Does the report deal fairly with the entire institution, without advocating selectively for constituency or other special interests?

- Comprehensiveness: Did the team affirm that the institution meets or exceeds the standards for accreditation? Does the report so state? Is it clear to the reader that academic quality has been examined? Have major findings been presented so that their importance cannot be overlooked?

- Documentation: Does the text of the report support the recommendations? Do the observations and conclusions clearly state the context or evidence on which the statements are based? (Example: "From discussions with college committees, observation of meetings and review of minutes, the team concludes that . . . ") "The team observed numerous examples of well thought out and effectively delivered educational programs. As noted in the self study, the college has undertaken a comprehensive review of their programs with the goal of better aligning course offerings with student enrollment patterns".

- Tone: Is the tone of the report appropriate to the circumstances and the intended effect? Unduly harsh criticism can affect the climate of an institution and can be harmful to individuals. The report should encourage the taking of appropriate actions by the institution. Accreditation employs the language of diplomacy, while being direct and clear as to meaning.

- Restraint: Does the report stray into enforcement or advocacy of matters outside the purview of the Commission's standards of good practice? Advocacy of other positions, objectives, or compliance requirements, no matter how praiseworthy or fashionable, must be approached with extreme care, and only where absolutely necessary.

- Economy. Have redundancies been consolidated in the report?

- Audience: Have you considered who may read the report, and with what purposes in mind? The document will be available to any persistent reporter, government agency or legislator. Review your draft through public eyes.

D Sample format for team member evaluation report

A sample template for the evaluation report is included with this Handbook for Evaluators. In addition, the team chair has copies of several reports from teams visiting other colleges which can be used as models. Team members also have the report from the previous team to the institution being evaluated. If the report from the previous team was not well constructed, it may be a source of examples of things NOT to do as an evaluator. Team members should be alert to changes in format or expectations which may have been developed since the time of the example evaluation reports.

TEAM MEMBER WRITTEN REPORT TEMPLATE

Standard_____ Team Member_____

I. **Responses to the previous team's recommendations:** The team member should assess the quality of the institution's responses:

- Recency of the response
- Completeness
- Validated reasons for non-response or a decision to address the issue differently
- Failure to address the recommendation(s)

II. **Observations:** The team member should write a descriptive narrative for the standard of responsibility as observed through interviews, documentation, meetings, visits, etc. which includes:

- Examples from the self study which were validated
- Examples from the self study which were not validated
- Reports of direct observations which relate to the standard

III. **Conclusions:** The team member should write a narrative which discusses:

- Strengths and weaknesses of the college in terms of the standard
- Areas in which the college did not fully address the standard
- Evaluation of the utility and effectiveness of the appraisal and planning sections of the self study
- Encouragement/commendation for initiatives which strengthen the college
- Evaluation of the Planning Agenda in the self study
- Discussion of the areas in which the institution does not meet or exceed the standards of accreditation
- Suggestions or general advice on relatively minor matters

IV. **Recommendations:** The team member should provide draft recommendations, if any, for the standard. All final recommendation language should be accepted by the entire team and should have the following attributes:

- Clear statements of the issue from the observations/conclusions section of the report
- Direct reference to the standard(s) involved
- Be of significance to the institution

WRITING EFFECTIVE RECOMMENDATIONS

One of the most difficult parts of the evaluation team visit is the actual drafting of recommendations to the college. The Commission asks that recommendations be diagnostic rather than prescriptive, supportive rather than destructive, substantive rather than trivial. Translating that expectation into reality under pressure and time constraints is a formidable challenge. The examples and comments that follow are drawn from the reports and recommendations written by actual teams -- edited to preserve institutional confidentiality -- and from reader reports written by Commission assessments of the team reports. Their purpose is to illustrate key principles and to provide concrete examples of both effective and ineffective recommendations.

Some team members may remember that the Commission used to use a format calling for "suggestions" and "recommendations." Experience has demonstrated that such an approach was not effective: Reports did not always distinguish between major and minor issues, there were simply too many items mentioned which tended to trivialize the whole process, and sometimes the teams indulged themselves in gratuitous advice to the college. Recommendations should be confined to those matters which involve the accreditation standards.

The Commission believes that a small number of recommendations which are tightly linked to the standards and call for a thoughtful response by the institution is preferable to an extensive laundry list of many recommendations which does not differentiate between major institutional issues and more minor specific suggestions. The latter can be incorporated into the Conclusions sections of the report. Team members discuss the characteristics of effective recommendations at the Team Training Workshop, but not all team members will have recently attended. A copy of the handout used at the Workshop is included. In addition, the sample team reports in this Evaluator Handbook show how conclusions in the text of the report can be referenced in the recommendations.

Principles of Effective Recommendations

1. Recommendations should reference the standards. Both the college and the Commission should be able to tell at a glance which standard(s) are being addressed. This might be accomplished by a reference to the standard at the end of the recommendation, or by quoting or paraphrasing the language of the standard in writing the recommendation.

   > ". . . should establish clear written policies and procedures delineating the roles and responsibilities of the various campus constituencies that participate in institutional governance. [Standards 10A.3, 10B.5, 10B.6, 10.B.7, 10B.8, 10B.9, 10B.10]"

2. Recommendations or observations should be consistent throughout the report. Inconsistencies will only serve to weaken the impact of the report, especially if the college may not be especially happy to hear what the team feels has to be said. Note this inconsistency from a team report.

   Report introduction: "The self study identified an impressive list of specific actions planned for the near future as well as long range."

   Report summary: "The team observed the self study action plans to be vague and lacking in specificity in dealing with several of the standards."

3. Recommendations should not be repeated over and over in each standard. If an issue is one which permeates the institution and team members working on several different standards all want to make a recommendation about it, combine these separate recommendations into one comprehensive recommendation which the institution will not be able to ignore.

   "The College should integrate into its schedule planning process the overall coordination and evaluation of credit and non-credit curricula, including the impact on staffing, facilities, and overall curricular balance." [Standards 1.2, 1.3, 3.A, 3.B, 3.C, 4A.1, 4A.4, 4D.5, 4D.6, 7A.1, 8.1,8.5,8.5]

4. Recommendations should be diplomatic, but not to the point of vagueness. The college needs to know what the problem is, and not be put in the position of trying to guess what the appropriate response might be. The same comment might be made about recommendations which are cliches, or unsupported generalities.

   "The Physical Science building has some safety problems."

   "The College needs to do planning."

5. Recommendations should avoid intrusion, inappropriate specificity, naming names, or telling specific people or offices how to do their jobs.

   "The ventilation fan in the Central Duplicating area should be replaced with a heavy duty model."

   "The College President should ensure the full implementation of the new College quantitative program review model; ensure implementation of the Accountability Model derived from Assembly Bill 1725, ensure implementation of the accreditation standards, and increase the staffing in the library and Learning Center on weekends and evenings."

6. Recommendations should not try to enforce the standards of governmental agencies, the legislature, or other organizations. The relevant standards for the team are those of the Commission.

   "The college is not in compliance with the standards of the National League for Nursing and should do so immediately."

   "The team recommends that the college complete its Matriculation Plan and report to the Chancellor's Office."

7. Recommendations should not merely tell the college to "continue to" engage in a particular activity. To reinforce or commend the college's behavior or direction, put a comment in the text of the report noting their accomplishments to date.

   Recommendation 4. ". . . continue to review the ways services are delivered to students at . . . campus and . . . Center."

8. Recommendations are made by the team. Individual team members do not have a quota of recommendations. Comments and general advice to the college are given in the text of the report, but may not warrant a full recommendation. A recommendation promoted by one member of the team must achieve acceptance by all members.

Each team member formulates recommendations for the sections of the report relating to his or her assignment. Advice to the institution, comments or suggestions should be made in the body of the report, leaving the recommendations section to focus on the critical issues or concerns of the team. In drafting recommendations, evaluators should directly link the recommendations to specific accreditation standards.

At a team meeting near the end of the visit, the team meets and decides which of its findings will be included in the final report, which recommendations cut across more than one standard and need to be consolidated, and which need to be eliminated or dealt with in another way. At this point, the recommendations become the recommendations of the team as a whole, not those of any individual member of the team.

The institution is urged to examine each recommendation in light of its own educational objectives and to use the report for the improvement of the institution. A college may concur or disagree with any part of the evaluation report, but it will be expected to respond to the report in the Midterm Report and the next comprehensive review. The report should be given wide distribution in the college community. Evaluators should consider the report to be a public document.

The complete evaluation team report is written by the team chair. A template for the report is included in this Evaluator Handbook so team members can understand what the entire report includes and how their report to the team chair contributes to the whole.

FORMAT OF THE TEAM CHAIR'S EVALUATION REPORT

1. Title Page

   This page states the name of the institution visited, dates of the visit, name of the team chair/author of the report. It includes the statement: "This report represents the findings of the evaluation team that visited (name of college) on (dates)."

2. Introduction

   This section is a brief statement of the nature of the institution and its accreditation history. General observations about the institution and about the visit should be stated in the introduction. If there are commendations to be made, they could be appropriately included in the introduction.

3. Responses to recommendations of the previous evaluation team

   This section of the report evaluates efforts by the institution to respond to previous recommendations. The institution is free to disagree with team recommendations and to select its own solutions to concerns raised by a previous evaluation team. Thoughtful responses to team recommendations are expected from an institution, whether in agreement or not.

4. Evaluations using ACCJC standards

   This section provides most of the substance of the report and is the section to which each team member makes a contribution. The team member's written report is used by the team chair in writing the evaluation team report for the college and the Commission. The team report notes whether evidence has been offered to demonstrate that the institution is accomplishing its published objectives and that these objectives are appropriate to higher education and consonant with Commission standards. The report establishes whether each standard is met by the institution. A sample format for the written reports from each team member is included in this Handbook. The team also provides detailed guidance during the course of the visit.

   Any recommendation to the college from the team should be stated clearly, and there should be evidence offered to justify making the recommendation. Recommendations should be numbered and few in number. A large number of recommendations tends to obscure the major recommendations. Repetitive recommendations should be consolidated into one major recommendation citing the appropriate standards.

5. The Team Recommendation to the Commission

   At the end of the visit the team makes a confidential recommendation to the Commission concerning the accreditation status of the institution.

At no time should the content of this recommendation be revealed to the institution The range of actions available to the team is determined by Commission policy. A copy of the Confidential Recommendation Form is included (Appendix A). Because there are a variety of recommendations available to the team, Commission has prepared a *Glossary of Actions, Definitions, and their Use*, which is included as Appendix B. This glossary summarizes Commission policy and describes the conditions under which each action should be considered. The team should discuss these options at the last team meeting. The complete Commission policy language for each action is found as Appendix C.

IV. TEAM MEMBER RESPONSIBILITIES AFTER THE VISIT

1. Review of the Team Chair draft

The team chair sends a draft of the report to the Commission office for preliminary review. The draft report is then sent to the members of the team and to the institution. The institution's response is limited to corrections of errors of fact. The team member's response should be a thoughtful review of the content and tone of the draft report. If there are inaccuracies, or if a team member believes that the report does not reflect the intent of the evaluation team, the team chair should be notified immediately.

2. Submission of Expense Forms and Documentation

The Commission office sends expense forms to each team member with the packet of materials for the visit. As soon as the visit is complete, reimbursement for direct expenses is made. **Special expenses such as car rentals or extra travel days must be approved by the Executive Director in advance.**

3. Evaluation of the visit and team chair

Each team member is asked to complete an evaluation of the visit and the team chair. These evaluations are reviewed in the Commission office and used to improve the process and outcomes of the site visits. Forms for this evaluation are provided by the team chair. (Appendix D)

4. Copy of the final report

When documentation of expenses is submitted to the Commission office, evaluation team members may request a copy of the final team report.

5. Communication with the institution

Sometimes individuals at the college being evaluated contact an evaluation team member after the visit to discuss concerns, the team findings, or team recommendations. Team members should refrain from discussing the visit and should refer the person to the Commission office and the team chair. If contacted in this manner, a team member should promptly notify the Executive Director and the team chair.

SECTION TWO

INTERIM VISITS

FOCUSED M!DTERM VISITS

THE INTERIM VISIT AND REPORT
THE FOCUSED MIDTERM VISIT AND REPORT

The Interim Report or a Focused Midterm Report is a limited report submitted by institutions under conditions determined by the Commission after a comprehensive evaluation visit. The Commission may believe that the nature of its concerns warrant a special visit by Commission representatives. Interim Report visits are related to issues of some urgency and occur within a year or two of the comprehensive evaluation visit. All institutions complete a Midterm Report in the third year of the accreditation cycle. The Commission may also ask that the Midterm Report be focused on a number of key recommendations from the comprehensive evaluation team and ask for a visit by Commission representatives.

Composition of an interim or focused midterm visit evaluation team.

Interim or focused midterm visit teams are usually composed of two or three members. Typically, the interim visit team is composed of one or two members of the comprehensive evaluation team, ideally persons who are familiar with the issues on which the institution is reporting. The team also includes a member of the Commission or Commission staff.

Organization of an interim visit.

The Commission names one of the team members as chair for the interim visit. This person assumes organizational responsibility for the visit and also writes the interim team report. The Commission office coordinates the date of the visit with the institution and the team members and distributes materials related to the visit, such as the comprehensive evaluation team report and the Commission action letter. The college provides copies of the Interim Report or Focused Midterm Report, depending on the nature of the visit. Travel and other logistical arrangements are coordinated by the team chair, working with the appropriate institutional representatives.

Conducting an interim visit.

An Interim Report is not a comprehensive self study, and the institution is not required to analyze its performance on each standard. A Focused Midterm Report is one in which the Commission identifies some of the comprehensive evaluation team's recommendations for special attention.

The visiting team is not expected to conduct a comprehensive review of the institution. Rather, the team is asked to validate the accuracy and usefulness of the Interim Report or the Focused Midterm Report. Resulting recommendations should address improvement in the areas identified by the Commission, evidence that the institution meets the standards of accreditation, and the quality of the institutional response. However, if issues arise since the time of the last review which indicate that the institution does not meet or exceed the standards of accreditation, and these issues are outside the original scope of the visit as outlined in the Commission action letter, the team has a responsibility to include these matters in its report and recommendation to the Commission.

Typically, the visit takes one day. Team meets with groups and individuals representing the major campus constituencies and those individuals who have knowledge of the issues which gave rise to the Interim Report or Focused Midterm Report Key groups include committees which prepared the report, members of the academic senate or other representative faculty bodies, administrators, staff representatives, student representatives, and trustees. The team should devote most of its time and attention to the issues raised in the Commission action letter and the report of the previous comprehensive evaluation team.

In every other way, the evaluation visit is conducted in accordance with the principles and procedures for conducting a comprehensive evaluation visit. Team members for these visits should consult the appropriate sections of the Handbook for Evaluators for information regarding preparation, sample questions, preparation of the report, and drafting recommendations.

Interim Visit or Focused Midterm Visit Report.

The team chair for the visit is responsible for writing the team report. Each member has responsibility for preparing a draft of appropriate sections for the team chair's use. Since the team report addresses the key issues raised in the Commission action letter, the team report should give most of its emphasis to them.

INTERIM VISIT or FOCUSED MIDTERM VISIT REPORT FORMAT AND CONTENT

1. Title Page

2. List of team members including titles and institutional affiliations.

3. Narrative statement.

   a. Introduction. This should be a brief statement of the nature of the institution and the reasons which led to the request for the Interim Report or Focused Midterm Report. General observations about the institution and about the visit should be stated in the introduction as should any commendations the team wishes to make.

   b. Discussion of the institution's responses to the comprehensive evaluation team report and Commission action letter.

      The team addresses each of the recommendations noting the quality of the institution's response, the progress made, and any remaining activities. The report should follow the recommendations for editorial tone and style discussed elsewhere in this Handbook. The report should state the observations made by the team, the analysis of the evidence, and any further recommendations by the team. **THE REPORT SHOULD NOT CONTAIN THE TEAM'S RECOMMENDATION TO THE COMMISSION.**

4. Confidential letter to the Commission.

   The team's recommendation to the Commission is contained in a cover letter written by the team chair. The cover letter expresses any special concerns or outlines specific issues which the team believes should be addressed in subsequent progress reports, interim visits or comprehensive reviews.

The Team Recommendation

The team has two primary responsibilities. The first is to validate the Interim or Focused Midterm Report through meetings, analysis of documentation, and review of the Report from the college. The second responsibility is to make a recommendation to the Commission concerning the disposition of the institutional report. The team may make one of the following recommendations:

1. Accept the Report. The team believes that the institution has responded satisfactorily and that the standards of accreditation are now met.

2. Accept the Report relating to certain recommendations, but ask for some further report. If the college has responded satisfactorily to only some of the recommendations the team may recommend further follow-up. This will vary according to the situation. Examples of additional follow-up might include a Progress Report, a Progress Report with a visit, additional focus in the Midterm Report with or without a visit, an addendum to the next Annual Report, or a special focus in the next comprehensive self study.

3. Not accept the Report. The team believes that the institution has not responded satisfactorily. In these cases, the team should recommend appropriate follow-up and cite the reasons in the cover letter to the Commission.

After the visit.

1. Review of the Team Chair draft.

The draft of the interim team report is reviewed by the Commission office, the members of the team, and the college (for errors of fact). Interim visit evaluators are cautioned that interim visits often occur close to the date of the Commission meeting, so prompt drafting and review of the interim team report is essential. After Commission review and action, the final report and the Commission action letter are sent to the institution.

2. Submission of Expense Forms and Documentation.

Expense forms are sent to each team member. As soon as the visit is complete, reimbursement for direct expenses is made. **Special expenses such as car rentals or extra travel days must be approved by the Executive Director in advance.**

APPENDICES

APPENDIX A

CONFIDENTIAL RECOMMENDATION FORM

Name of institution evaluated _____

Date(s) of visit _____ Type of visit _____

The visiting team's confidential recommendation to the Accrediting Commission for Community and Junior Colleges is:

Actions on Candidate Institutions

_____ Grant candidacy

_____ Extend candidacy

_____ Defer decision on candidacy (state reasons)

_____ Deny candidacy (state reasons)

_____ Terminate candidacy (state reasons)

Actions on Initial Accreditation

_____ Grant initial accreditation

_____ Grant initial accreditation with a interim report in _____ years (state reasons)

_____ Grant initial accreditation with a interim report and limited visit in _____ years (state reasons)

_____ Defer action on accreditation (state reasons)

_____ Deny accreditation; extend candidacy (state reasons)

_____ Deny accreditation (state reasons)

Actions on Accredited Institutions

_____ Reaffirm accreditation

_____ Reaffirm accreditation with an interim report in _____ years (state reasons)

_____ Reaffirm accreditation with an interim report and limited visit in _____ years (state reasons)

_____ Reaffirm accreditation with a Focused Midterm Report in _____(state reasons)

_____ Reaffirm accreditation with a Focused Midterm Report and limited visit in _____(state reasons)

_____ Defer action on accreditation (state reasons)

_____ Issue a warning to correct deficiencies by _____ (state reasons)
(Date)

_____ Impose probation through _____ (state reasons)
(Date)

_____ Impose show cause order through _____ (state reasons)
(Date)

_____ Terminate accreditation (state reasons)

Signed _____
(Chairperson)

Note: Attach a summary of the report which sets forth the major considerations which caused the team to make the above recommendation. The team recommendation should be consistent with and supported by the team report. If there is an unresolved minority opinion, attach a supplementary sheet.

VERIFICATION OF RECOMMENDATION

This form should be completed by the chairperson and signed by each member of the team before leaving the institution.

NAME of TEAM MEMBER (print or type)	INSTITUTION	SIGNATURE

APPENDIX B

ACCREDITING COMMISSION FOR COMMUNITY AND JUNIOR COLLEGES

GLOSSARY OF ACTIONS, DEFINITIONS AND USAGE FOR ACCREDITED INSTITUTIONS

I. Comprehensive Evaluations

A. Reaffirmation: The institution substantially meets or exceeds accreditation standards. Recommendations are directed toward strengthening the institution, not correcting situations where the institution fails to meet the standards. The institution files a Midterm Report by November 1 of the third year of the six year accreditation cycle.

B. Reaffirmation with an Interim Report: The institution substantially meets or exceeds accreditation standards, but receives recommendations on a small number of issues of some urgency which if not addressed immediately, may threaten the ability of the institution to continue to meet accreditation standards. A written report addresses these issues to achieve resolution within a one to two year period. In addition, the institution files a Midterm Report by November 1 of the third year of the six year accreditation cycle.

C. Reaffirmation with an Interim Report and an interim visit. The institution substantially meets or exceeds accreditation standards, but there are recommendations on a small number of issues of some urgency and the Commission has some concern that the institution:

--has not addressed the issues in previous evaluation visits, or
--does not appear to recognize the seriousness of the issues, or
--may not currently have the capacity to address the concerns, or
--validation of success in addressing the recommendations can only be accomplished by direct conversations on the campus.

A written Interim Report followed by a limited visit by Commission representatives, addresses the recommendations within a one to two year period. In addition, the institution files a Midterm Report on November 1 of the third year of the accreditation cycle.

D. Midterm Reports: A Midterm Report, unless otherwise focused by the Commission, is a mandatory institutional report of its responses to team and Commission recommendations and a forecast of where it expects to be at the time of the next comprehensive evaluation. The institution also provides a summary of progress on issues it identified in the Self Study which did not result in team recommendations. In addition to the regular Midterm Report, two special forms of Midterm Reports are possible.

1. Reaffirmation with a Focused Midterm Report:

2. Reaffirmation with a Focused Midterm Report and limited visit:

The institution substantially meets or exceeds accreditation standards, but the Commission wishes to direct the institution's attention to a small number of the recommendations for special emphasis. Adding a visit to the focused report is warranted depending on the institution's accreditation history, capacity, or nature of the recommendations.

E. Defer a decision on reaffirmation on accreditation: The institution substantially meets or exceeds most accreditation standards, but (1) specific information which will be available within a short time is needed to render a decision, or (2) correction of a serious weakness is expected in a short period of time. Deferring a decision is limited to those cases where making a decision to reaffirm or to issue some negative sanction could be unfair to the institution or the Commission. The action is not reported as a public negative sanction. Resolution of the reasons for the deferment is expected within six months. The college is informed as to the outcome if the reasons for the deferment decision are removed, or the consequences if the reasons for deferment are not addressed.

F. Warning: The institution deviates from the Commission's eligibility criteria, standards, or policies to the degree that the institution's continued accreditation may become jeopardized. The warning may require the institution to correct deficiencies, refrain from certain activities, or initiate certain actions. Failure to respond effectively to prior Commission actions may result in a warning. The action is not reported as a public negative action. Institutional reports, visits, and resolution of the concerns are required within two years.

G. Probation: Institutions failing to substantially meet or exceed accreditation standards or who fail to respond to actions and conditions imposed by the Commission are placed on probation. This is a public negative action, and requires institutional reports and visits on a regular schedule. Institutions are expected to correct deficiencies within a two year period. The period of probation may be extended for appropriate cause. Failure to remedy the reasons for probation leads to a show cause action.

H. Show Cause: The institution is in substantial non-compliance with eligibility criteria, standards, or policies or has not responded to Commission actions or conditions. This public negative action requires the institution to demonstrate why its accreditation should not be terminated. The action requires special reports and visits by the Commission. Resolution of the reasons for the show cause order should be achieved within one year. Accredited status continues during the show cause period.

I. Termination. The institution has not corrected matters of non-compliance of which it has received notice. This public negative action is subject to request for review by the Commission and appeal to the WASC Board. Accredited status continues through the period of appeal. Appeals must be made within 30 days of Commission action.

II. Progress Report

An institution may fail to adequately address a recommendation or Commission action. The Commission may request a progress report on these matters which may include a limited visit. Resolution of the issues which prompted the Progress Report should be achieved in a year or less.

III. Substantive Change

Substantive change occurs when an institution so alters its organization, programs, or services that review of its grant of accreditation is needed. Examples include merger, change of ownership or control; change in the education mission; change in the geographical area being served including international sites; change of degrees offered; establishing a major center or branch campus; or contractual relationships with non-regionally accredited organizations. Prior Commission approval is required.

APPENDIX C

COMMISSION RANGE OF INSTITUTIONAL ACTIONS

Actions on Candidate Institutions

- Grant Candidacy. Candidacy is a pre-accreditation status, initially awarded for two years. Candidate status will be granted only to institutions that demonstrate the ability and will to meet the standards for accreditation within the candidate period.

- Extend Candidacy. Candidacy is renewed for two years. (Four years in candidate status is maximum available.)

- Defer a decision on candidacy pending receipt of specified information from the institution.

- Deny Candidacy. The institution may reapply for candidacy by submitting a self study after two years.

- Termination of Candidacy. If, in the opinion of the Commission, an institution has not maintained its eligibility for candidacy or has failed to explain or correct deficiencies of which it has been given notice, the candidacy of the institution may be terminated. Termination may be subject to a request for review by the Commission and subsequent appeal to the Western Association of Schools and Colleges under the published policies and procedures of these two bodies.

Actions on Initial Accreditation

- Grant initial accreditation. The institution must be fully evaluated again within a maximum of four years from the date of the Commission action.

- Grant initial accreditation with a request for a follow-up report and/or a visit within a limited time. The Commission will specify the nature, purpose, and scope of the information to be submitted and of the visit to be made.

- Defer a decision on accreditation pending receipt of specified additional information from the institution or, to permit an institution to correct serious weaknesses and report to the Commission within a limited time. The Commission will specify the nature, purpose, and scope of the information to be submitted and of the visit to be made. If the institution is a candidate for accreditation, candidacy continues during the period of deferment.

- Denial of accreditation. A denial is a final decision which is subject to a request for review by the Commission and subsequent appeal to the Western Association of Schools and Colleges under the published policies and procedures of these two bodies. A candidate institution may be permitted to remain in candidate status until it is ready for a new evaluation within a limited period of time. In cases where the four year limit on candidacy has been reached, the Commission may consider extending the limit in special circumstances. If an extension is not granted, the institution may not reapply for candidacy for at least two years.

Actions on Accredited Institutions

- Reaffirmation of accreditation without conditions.
  NOTE: All institutions submit a Midterm Report three years following the comprehensive evaluation visit. The Midterm Report states the institution's response to recommendations in the team report.

- Reaffirmation of accreditation, with a request for an interim report to be submitted by a specific date.

- Reaffirmation of accreditation, to be followed by an interim visit. In such cases, the Commission will specify the nature, purpose, and scope of any further information to be submitted by the institution and of the visit to be made.

- Defer a decision on accreditation pending receipt of specified additional information from the institution or, to permit an institution to correct serious weaknesses and report to the Commission within a limited time. The report is followed by a visit addressed primarily to the reasons for the decision. The Commission will specify the nature, purpose, and scope of the information to be submitted and of the visit to be made. The accredited status of the institution continues during the period of deferment.

- Warning. When the Commission finds that an institution has pursued a course deviating from the Commission's eligibility criteria, standards, or policies to an extent that gives concern to the Commission, it may issue a warning to the institution to correct its deficiencies, refrain from certain activities, or initiate certain activities within a stated period of time. The accreditation status of the institution continues during the warning period.

- Probation. When a candidate or accredited institution fails to respond to conditions imposed upon it by the Commission, including a warning, or when it deviates significantly from the Commission's eligibility criteria, standards, or policies but not to such an extent as to warrant a show cause order or the termination of candidacy or accreditation, it may be placed on probation for a specified period of time. While on probation, the institution will be subject to special scrutiny by the Commission, including a requirement to submit periodic prescribed reports and undergo special visit(s) by representatives of the Commission. If the institution has not taken steps satisfactory to the Commission to remove the cause or causes for its probation at the end of the specified time, the Commission will issue a show cause order. The accredited status of the institution continues during the probation period.

- Show Cause. When the Commission finds an institution to be in substantial non-compliance with its criteria or policies or when the institution has not responded to the conditions imposed by the Commission, the Commission may require the institution to show cause why its accreditation should not be withdrawn at the end of a stated period. In such cases, the burden of proof will rest on the institution to demonstrate why its accreditation should be continued. While under a show cause order, the institution will be subject to special scrutiny by the Commission, including a requirement to submit periodic prescribed reports and undergo special visit(s) by representatives of the Commission. The accredited status of the institution continues during the period of the show cause order.

- Termination of Accreditation. If, in the judgment of the Commission, an institution has not satisfactorily explained or corrected matters of which it has been given notice, its accreditation may be terminated. In such a case, the institution must complete again the entire accreditation process to qualify for candidacy or accreditation. Termination of accreditation is subject to a request for review and appeal under the applicable policies and procedures of the Commission and the Western Association of Schools and Colleges. The accredited status of the institution continues pending completion of any review appeal process the institution may request. Otherwise, the institution's accreditation ends on the date when the time period permitting such a request expires.

  In all cases of negative action, the Commission will give the institution written reasons for its decision.

A letter written by the team chair is required when the team recommends that the institution be required to produce a focused Midterm Report, an interim report, have an interim report and a limited visit, be issued a warning, or receive any public negative sanction.

APPENDIX D

TEAM MEMBER APPRAISAL OF EVALUATION VISIT AND TEAM CHAIR

Your confidential appraisal of the evaluation visit, including emphasis on the team chairperson, will be very helpful to the Accrediting Commission for Community and Junior Colleges.

Evaluation Visit to_____

Confidential Appraisal of_____

	SCALE: A = Excellent - F = Very Poor	Circle one:
1.	Did you receive the necessary materials and information about the visit from the ACCJC office?	A B C D F
2.	Was the visit well organized and were team assignments reasonable and acceptable?	A B C D F
3.	Did the chairperson provide capable guidance to the team before and during the visit?	A B C D F
4.	Did the chairperson make clear and direct suggestions and work well with individual members of the team?	A B C D F
5.	Did the chairperson maintain a fair and objective attitude toward the college?	A B C D F
6.	Should this person be invited again to serve as a well-qualified chairperson?	A B C D F

Suggestions for Improvement of the Evaluation Process

_____

_____

_____

_____

Date _____ Signature_____

APPENDIX E

ACCREDITING COMMISSION FOR COMMUNITY AND JUNIOR COLLEGES

POLICY STATEMENT ON DIVERSITY
(Adopted January, 1994)

How an institution deals with diversity is an important indicator of its integrity and effectiveness. Institutions accredited by the Commission consider diversity issues in a thorough and professional manner. Every institution affiliated with the Commission is expected to provide and sustain an environment in which all persons in the college community can interact on a basis of accepting differences, respecting each individual and valuing diversity. Each institution is responsible for assessing the quality and diversity of its campus environment and for demonstrating how diversity is served by the goals and mission of the college and district. In addition, institutions must identify the processes that actively promote diversity in the everyday environment and the academic programs of the college. Accreditation teams will evaluate the condition of institutional diversity during the site visits and include findings and recommendations in written reports to the Accrediting Commission.

The Commission "Statement on Diversity" is designed to guide institutions and evaluation teams in the self study and site visit process and to indicate how institution-wide reviews of issues of diversity should be documented in the self study and visiting team reports. The Accrediting Commission, taking into account the mission of the institution and the entirety of the self study and peer review processes, will evaluate the institution's effectiveness in addressing issues of diversity.

January 11, 1994

WESTERN ASSOCIATION OF SCHOOLS AND COLLEGES
ACCREDITING COMMISSION FOR COMMUNITY AND JUNIOR COLLEGES

STATEMENT ON DIVERSITY

PREAMBLE

Diversity itself is an increasingly comprehensive term, encompassing the diversity of institutions with their unique mission statements; the diversity of ethnic and gender backgrounds of faculty, administration, staff and student bodies; and the diversity of cultures in the larger communities. This broad conception includes the social climate on campus as well as the intellectual climate. It extends to the curriculum, and includes awareness and understanding of diverse cultural values.

Within the individual institution, diversity can be incorporated into support structures and processes designed to ensure the inclusion of all members of the educational community. Attention to diversity is expressed by the institution's recognition that its programs and services must provide equal opportunity for all in order for the institution to effectively achieve its missions and goals. The diverse campus is one whose student body, faculty and staff are reflective of the broader community. It provides comprehensive curriculum that reflects the heterogeneous culture of that community. The institution also strives to remove all barriers to equal access to its programs and services by assessing the effectiveness of its programs and services in promoting the participation, retention, progress and success of all its students.

Additionally, the Commission is concerned that the concepts of diversity and affirmative action are often used interchangeably, leading to narrow, and often overly legalistic interpretations. Previous Commission statements speak of achieving and serving diversity. The Commission believes that diversity is an institutional condition, composed of many elements found throughout the institution in the programs and services, the curriculum, the physical setting, and the staff. Affirmative action, as used in the standards and policies of the Commission, refers to some of the plans, policies and implementation strategies utilized by institutions to achieve diversity. Thus, affirmative action is a program, one of many means to reach and support the desired goals.

The Commission serves a diverse group of institutions: private and public, large and small, comprehensive and specialized. Within the mission statements of all these colleges a common interest is explicit: preparing students for lives of effective participation in the civic culture of their communities as well as the rapidly changing world of work. The Commission believes that this commonality of mission is the foundation of its standards on diversity. Member institutions believe that institutions of higher education are places in which those who teach, work and learn are bound in a common enterprise which creates, protects, and promotes an active concern for the dignity and success of every individual. The Commission expects this active concern to be demonstrably evident in the life and climate of the institution.

ACCJC Standards and Diversity

This statement is designed to assist colleges developing self studies, to provide evaluation teams with clear statements of Commission expectations and to form a foundation for Commission decision making. The Commission intends that the statement will also serve to reaffirm the historic role of community and two year colleges as the primary access point to higher education for thousands of students. Throughout, the statement focuses on issues of institutional integrity, effectiveness, and climate. The language is that of inclusivity and participation, not that of divisiveness and separation.

Institutions conducting self studies need to be able to link the various elements of diversity together in order to develop a clear description of the status of diversity at the institution, to ask the analytical questions which will provide a meaningful assessment of diversity concerns, and to formulate planning agendas which will set the direction and priorities for institutional efforts.

Diversity standards are arranged in three clusters:

1. Diversity and Institutional Integrity, which expresses institutional mission and values;
2. Diversity and Institutional Effectiveness, which includes educational quality, programs, services, and activities;
3. Diversity and Institutional Climate, which encompasses all aspects of the teaching and learning environment.

Each cluster is discussed within the accreditation context, and examples of the analytical questions which could be asked for selected standards are provided. The statement is a guide to action and a stimulus for inquiry at each college as it carries out its accreditation activities. The complete text of the accreditation standards related to diversity is arranged by cluster.

By adopting a more thematic approach to developing the self study, colleges create an institution-wide perspective and broad based plans which recognize the multiple manifestations of diversity throughout the institution. At the very least, colleges are expected to forego frames of reference which define diversity solely as a personnel issue. These standards also encourage the college to focus more on the outcomes of institutional activities, and not exclusively on resources and processes.

Diversity and Institutional Integrity

Through the standards for institutional integrity, the college community asks itself what its mission is, for whom it exists, and what ends it serves. It assesses its faithfulness to its stated purposes. The standards which link institutional integrity and diversity issues are those which address the mission and core values of the institution. Some common approaches include policy reviews, formulation of analytical questions, information gathering to assess the extent and depth of understanding, and identification of areas in need of development. The challenge is to move beyond the presence of a policy or the existence of a glowing mission statement to an investigation of the impact of those written commitments in the life of the institution and the community.

The Commission stresses the importance of asking analytical questions to determine how an institution meets or exceeds the standards. For example, Standard 1, Institutional Mission, requires that an institution identify its constituencies, delineate the parameters of its mission, and determine the resource allocation priorities by which the mission will be carried out.

Analytical questions, which could be used by a college to assess whether or not it meets the standard, could include the following:

- What is our service area, and who is within it? What are the distribution, participation, and completion patterns among various types of students? How do we know if we are reaching those within the constituencies?

- How do we decide whether a program fits within our mission? How do we decide to start or stop a program or service?

- What is the method of allocating resources among programs and services? If the needs of a constituency change, how are those changes reflected in the allocation of resources?

The Commission standards of accreditation do not prescribe numbers, quotas or proportions. Institutions are expected to have plans in place to improve diversity, mechanisms for monitoring progress, a capability for analyzing results, and effective means for making informed decisions.

Diversity and Institutional Effectiveness

Just as the institutional integrity standards address what the institution claims to be, the Diversity and Institutional Effectiveness standards focus on what the college does in its educational curricula, programs, student services, and institutional operations. The standards are statements of good practice and serve as measures and indicators by which the institution may assess how well it is meeting its stated purposes and goals. All of the standards assume that there is a relationship between the standards of good practice and institutional quality. The standards which relate to some aspect of diversity show how the programs, services and activities of and institution coalesce and contribute to achieving and serving diversity.

A curriculum which investigates the best expressions of a wide range of cultures and traditions exposes students to a broad and rich intellectual world. Teaching effectiveness demands that faculty are aware of various intellectual traditions and pedagogical approaches and that they display receptivity to the perspectives, experiences and learning styles of students. Learning effectiveness requires that students have opportunities to study multiple perspectives, and to interact with those holding different points of view in order to hone their analytical and evaluative skills.

Standard 4C., General Education, requires that educational programs address the several and distinct ways that students might demonstrate competence in core educational skills and their appreciation of the variety of human experience. Assessment of the institution's effectiveness in addressing diversity in general education might include questions such as:

- How do the curricula of academic skills subjects address differences of learning styles? What alternative methods are in place for students to demonstrate competence?
- What opportunities are available for fostering appreciation of cultural diversity and how are these incorporated into the curriculum?
- How do faculty review the curricula to assess the need for any changes?

Diversity and Institutional Climate

The Diversity and Institutional Climate standards address the atmosphere in which faculty, staff and students work and learn. This environment is critical to the effectiveness of an institution and embraces concern for equity, access, participation, retention, and for the attainment of educational and personal goals.

All institutions aspire to a campus environment of receptivity, inclusivity, and supportiveness. Important indicators of institutional quality are the ways these characteristics are displayed by members of the institution, the perceptions held by constituent individuals and groups, and the responses by the institution to challenges to the learning environment.

The standards include questions of representation, access, awareness, participation, and allocation of resources within the mission of the institution. This perspective requires the college to be more inclusive in considering who is affected by institutional culture and climate and to evaluate the learning environment in terms of the unique circumstances of each institution.

In order to provide and sustain a diverse campus climate, supportive interaction between staff and students, within and outside of class, is essential in achieving an atmosphere of understanding and appreciation of people and ideas that is conducive to learning excellence. A campus climate which fosters an interest in fairness and an understanding and respect for commonalities and differences prepares students to interact more successfully in a society and world characterized by cultural and social diversity.

An atmosphere which insures that candidates for positions are treated equitably, facilities that do not present barriers to participation, and governance processes which insure that the public interest is appropriately served are indicators of an attractive, hospitable college. Questions appropriate to this aspect of a self study include:

- What discussions have occurred which examine the strength and breadth of the college's efforts to address issues of student and staff equity?
- How are the college policies concerning employment equity carried out and what evaluations of those policies have occurred?
- In what ways is the governing board reflective of the public interest and what does the board do to assess its interactions with the various communities the college serves?
- How does the physical arrangement of the college enable, or limit, full participation in programs and services?

Commitment to achieving and serving diversity on our campuses requires attention to ethical principles, demographic configurations, citizenship and economic participation, enhancement of the educational experience, and sensitivity to group identification and values. Working together, the Commission and the institutions which constitute ACCJC embrace this opportunity to exercise leadership in promoting, achieving, and serving the diversity of the communities of which we are a part.

The accreditation process and the standards on which the Commission and colleges base their activities and decisions are dynamic and continually evolving. The Commission expects to incorporate the perspective of this statement and the experiences of the colleges and teams in the next Handbook of Accreditation and Policy Manual, and welcomes the thoughtful commentary and suggestions from all constituents.

ACCJC STANDARDS AND DIVERSITY

OVERVIEW: One of the central themes is the Commission's interest in the effectiveness of member institutions with respect to issues of diversity. As is clear by this rearrangement of the standards, the Commission views diversity as an institution-wide matter which touches many areas within the college. If the team needs to make statements and recommendations to the institution about diversity, this organization of the standards allows the team chair to address the college and the standards thematically.

I. Diversity and Institutional Integrity

Standard One: Institutional Mission

1. The institution has a statement of mission, adopted by the governing board which identifies the broad-based educational purposes it seeks to achieve.

2. The mission statement defines the students the institution intends to serve as well as the parameters under which programs can be offered and resources allocated.

Standard Two: Institutional Integrity

2. The institution has a readily available governing board-adopted policy protecting academic freedom and responsibility which states the institutional commitment to the free pursuit and dissemination of knowledge and fosters the integrity of the teaching-learning process.

4. Institutions which strive to instill specific beliefs or world views or to require codes of conduct of faculty, administrative and support staff, or students give clear prior notice of such policies.

6. The institution demonstrates through policies and practices an appropriate understanding of and concern for issues of equity and diversity.

Standard Four: Educational Programs

Preamble: Standard Four is broadly applicable to all educational activities offered in the name of the institution, regardless of where, when or how presented, or by whom taught.

4A.1 The institution seeks to meet the varied educational needs of its students through programs consistent with its institutional mission and purposes and the demographics and economics of its community.

Standard Five: Student Support and Development

Preamble: The institution recruits and admits students appropriate to its programs. It identifies and serves the diverse needs of its students with educational programs and learning support services, and it fosters a supportive learning environment. The entire student pathway through the institutional experience is characterized by a concern for student access, progress, and success.

3. The institution identifies the educational support needs of its student population and provides appropriate services and programs to address those needs.

5. Admissions and assessment instruments and placement practices are designed to minimize test and other bias and are regularly evaluated to assure effectiveness.

7. The institution, in keeping with its mission, creates and maintains a campus climate which serves and supports its diverse student population.

Standard Seven: Faculty and Staff

Preamble: The institution has sufficient qualified full-time and part-time faculty and staff to support its educational programs and services wherever offered and by whatever means delivered. Consistent with its mission, the institution demonstrates its commitment to the significant educational role played by persons of diverse ethnic, social, and economic backgrounds by making positive efforts to foster such diversity.

II. Diversity and Institutional Effectiveness

Standard Three: Institutional Effectiveness

3A. Institutional Research and Evaluation

A.3 The institution has developed and implemented the means for evaluating how well, and in what ways, it accomplishes its mission and purposes.

A.4 The institution provides evidence that its program evaluations lead to improvement of programs and services.

3B. Institutional Planning

B.3 The institution engages in systematic and integrated educational, financial, physical, and human resources planning and implements changes to improve programs and services.

3C.1 The institution specifies intended institutional outcomes and has clear documentation of their achievement.

3C.2 The institution uses information from its evaluation and planning activities to communicate matters of quality assurance to the public.

3C.3 The institution systematically reviews and modifies, as appropriate, its institutional research efforts, evaluation processes, institutional plans, and planning processes to determine their ongoing utility for assessing institutional effectiveness.

Standard Four: Educational Programs

4A. General Provisions

A.1 The institution seeks to meet the varied educational needs of its students through programs consistent with its institutional mission and purposes and the demographics and economics of its community.

4C. General Education

4C.3 The general education program introduces the content and methodology of the major areas of knowledge: the humanities and fine arts, the natural sciences, and the social sciences. The general education program provides the opportunity for students to develop the intellectual skills, information technology facility, affective and creative capabilities, social attitudes, and an appreciation for cultural diversity that will make them effective learners and citizens.

4C.4 Students completing the institution's general education program demonstrate competence in oral and written communication, scientific and quantitative reasoning, and critical analysis/logical thinking.

Standard Five: Student Support and Development

3. The institution identifies the educational support needs of its student population and provides appropriate services and programs to address those needs.

4. The institution involves students, as appropriate, in planning and evaluating student support and development services.

5. Admissions and assessment instruments and placement practices are designed to minimize test and other bias and are regularly evaluated to assure effectiveness.

Standard Six: Information and Learning Resources

General Provisions

1. Information and learning resources, and any equipment needed to access the holdings of libraries, media centers, computer centers, databases and other repositories are sufficient to support the courses, programs, and degrees wherever offered.

4. The institution has professionally qualified staff to provide appropriate support to users of information and learning resources, including training in the effective application of information technology to student learning.

Standard Seven: Faculty and Staff

Preamble: The institution has sufficient qualified full-time and part-time faculty and staff to support its educational programs and services wherever offered and by whatever means delivered. Consistent with its mission, the institution demonstrates its commitment to the significant educational role played by persons of diverse ethnic, social, and economic backgrounds by making positive efforts to foster such diversity.

III. Diversity and Institutional Climate

Standard Two: Institutional Integrity

4. Institutions which strive to instill specific beliefs or world views or to require codes of conduct of faculty, administrative and support staff, or students give clear prior notice of such policies.

6. The institution demonstrates through policies and practices an appropriate understanding of and concern for issues of equity and diversity.

Standard Five: Student Support and Development

Preamble: The institution recruits and admits students appropriate to its programs. It identifies and serves the diverse needs of its students with educational programs and learning support services, and it fosters a supportive learning environment. The entire student pathway through the institutional experience is characterized by a concern for student access, progress, and success.

3. The institution identifies the educational support needs of its student population and provides appropriate services and programs to address those needs.

5. Admissions and assessment instruments and placement practices are designed to minimize test and other bias and are regularly evaluated to assure effectiveness.

7. The institution, in keeping with its mission, creates and maintains a campus climate which serves and supports its diverse student population.

8. The institution supports a co-curricular environment that fosters intellectual, ethical, and personal development for all of its students and encourage personal and civic responsibility.

Standard Six: Information and Learning Resources

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7D. General Personnel Provisions

D.1 The institution has and adheres to written policies ensuring fairness in all employment procedures.

D.2 The institution regularly assesses and reports its achievement of its employment equity objectives, consistent with the institutional mission.

D.3 Personnel policies and procedures affecting all categories of staff are systematically developed, clear, equitably administered, and available for information and review.

D.4 The institution makes provision for the security and confidentiality of personnel records. Personnel records are private, accurate, complete, and permanent.

Standard Eight: Physical Resources

3. Physical facilities at all site locations where courses, programs, and services are offered are constructed and maintained in accordance with the institution's obligation to ensure access, safety, security, and a healthful environment.

APPENDIX F

WESTERN ASSOCIATION OF SCHOOLS AND COLLEGES
ACCREDITING COMMISSION FOR COMMUNITY AND JUNIOR COLLEGES

INSTITUTIONAL EFFECTIVENESS

A GUIDE FOR THE SELF STUDY

BACKGROUND

During the 1980s, all institutions of higher education were challenged by numerous external agencies and organizations to demonstrate their effectiveness in quantifiable, verifiable terms. The public's interest in holding institutions accountable for specific outcomes, especially for outcomes pertaining to student performance and success, was carried out in federal policies, state legislative mandates, and local requirements. Such measures were and are considered to be appropriate in evaluating both the public's and the student-consumer's investment in a college education. Rapidly changing student demographics underscored the need to measure progress in order to ensure that new, nontraditional student populations were being well served and well prepared.

Within the higher education community, there has been extensive attention to the purposes and methodologies of institutional effectiveness. In August 1992, the AB 1725 Accountability Task Force of the California Community Colleges Chancellor' Office issued its final report, "Accountability: An Investment of Quality", calling for greater efforts in institutional research and management information, a statewide approach to college accountability, and improved data bases for student transfer and student employment information. The California Community Colleges also provided the digest, "Criteria and Measures of Institutional Effectiveness", as a guide for local community colleges. The University of Hawaii Community Colleges, in conjunction with other Pacific Rim institutions, recently developed guidelines for assessing institutional effectiveness in its report, "Comparative Assessment of Performance Guidelines", offering criteria and indicators for program review as well as for establishing the need for programs.

Accrediting associations also joined this movement, viewing it as a means to strengthen the self-assessment and quality-assurance processes that are at the heart of the process of peer review. The Council on Postsecondary Accreditation (COPA) published resource papers for its Task Force on Institutional Effectiveness, "Accreditation, Assessment and Institutional Effectiveness", and the WASC Accrediting Commission for Senior Colleges and Universities published a resource manual, "Achieving Institutional Effectiveness Through Assessment". Those wishing a complete history and overview of the institutional effectiveness movement may wish to read A Practitioner's Handbook for Institutional Effectiveness and Student Outcomes Assessment Implementation by James Nichols (1991, New York, Agathon Press).

PREPARING FOR THE SELF STUDY

As part of its recent revision of the standards for accreditation, the WASC Accrediting Commission for Community and Junior Colleges developed new criteria and assigned a greater emphasis to all aspects of institutional effectiveness, devoting one entire standard to this consideration and infusing other standards with similar issues. Because of the importance and pervasive nature of these issues, institutions are encouraged to review their overall strategy for addressing all aspects of institutional effectiveness prior to embarking upon a consideration of the individual standards and sections of the self study.

Colleges in multi-college systems should review their strategy in close coordination with their district or system office as well as with other colleges within the system where comparable data may be sought during simultaneous or coordinated evaluating visits.

CONDUCTING THE SELF STUDY

Each institution will approach the documentation of institutional effectiveness in its own way. Since references to planning and institutional effectiveness are found throughout the accreditation standards, the following general guidelines have been developed to assist institutions in identifying the types of information that are expected when discussing planning and effectiveness so that clear documentation is provided to visiting teams and the Commission in the self-study.

1. Purposes and Mission. Perhaps the largest question raised in the review of institutional effectiveness is the degree of the institution's success in achieving its basic purposes and mission. Too often institutional mission is either taken for granted or the institution is assumed to be achieving its stated ends. Institutions should have in place a regular means of updating their mission as community needs change, of assessing community needs, and of assessing success in meeting those needs. The self study process invites a thorough review and reassessment of institutional mission within the context of institutional effectiveness.

In preparing a self study, institutions should seek answers to questions such as the following:

- When was the last "periodic reexamination" of the statement of purposes conducted? How was it conducted, and by whom? What changes were made, and why?
- What factors delimit the program offerings and resource allocation?
- How is the mission statement used in the development of programs and the allocation of resources?

Institutions sometimes view staff evaluation primarily as an employee relations or contractual issue; however, effective evaluation should be connected to institutional purposes and the effectiveness of the staff in supporting those purposes.

Similarly, staff development can play an important role in the institution's ability to implement plans and effectively meet the changing needs of students. The self study should clearly describe and evaluate the relationship of evaluation and staff development to the institution's effectiveness in fulfilling its mission.

Documentation: The self study should specifically describe and evaluate the institutional review of the college's mission statement (Standard one). While many institutions continue to serve the same objectives over time, the self study should be used as an opportunity to evaluate, revise, and update the way the institution expresses those objectives. Therefore, the self study should make specific references to the mission statement in the description and analysis of the institution's response to each of the accreditation standards. Essentially, the mission statement should be viewed as the basic set of criteria against which institutional effectiveness is measured. Planning is designed to achieve the goals established in the mission statement and programs and services are the core activities designed to accomplish the mission. Data is collected to assess the effectiveness of the planning and programs in accomplishing the various aspects of the mission. The self study documents the institution's coordinated effectiveness in accomplishing its mission using planning, programs and services, and various forms of data.

2. Planning. One hallmark of institutional effectiveness is planning; *i.e.*, the manner in which institutions are guided in achieving specified goals. Planning may take place in a systematic, sophisticated manner in some institutions. Others may have multiple informal planning activities for discrete areas of the operation but have no mechanism in place for comprehensive, institutional planning. Institutions preparing for the self study should begin by taking an inventory of all planning efforts underway and outlining the relationship of these planning efforts to each other and to the whole. The effectiveness of planning will increase by the degree to which it actually becomes institutional rather than focused upon areas within the institution; this will be the challenge for colleges to address in their action plans.

- How does the institution define planning? How does it distinguish among planning to plan, planning processes, and planning outcomes?
- How does the institution insure that planning is comprehensive in scope, systematic in process, and inclusive in participation ?
- What does the institution do with the results of its planning activities?

Documentation: Self studies should clearly detail the names and purposes of major planning documents and procedures. The discussion of planning should articulate (1) the processes used in planning with reference to long- and short-term responsibilities, (2) the criteria used for planning, (3) the relation of planning to the institution's mission, (4) how plans are implemented, (5) what procedures have been established to review and revise plans and implementation schedules; (6) what provisions have been made to review the effectiveness of the planning processes.

In addition, the self study should describe and evaluate the involvement of various constituencies within the institution that have been engaged in planning based on their authority, representativeness, expertise, and their responsibilities for the implementation of the plans. The effectiveness of planning and the implementation of plans should be evaluated by the parties directly involved in the processes as well as the members of the institution at-large.

3. Data. Measurable outcomes, measurable progress and other issues requiring quantitative analysis must rely upon a body of undisputed facts and an accepted methodology for interpreting these institutional facts. Prior to beginning the self study, institutions need to determine what data and what methodologies will be used to demonstrate institutional effectiveness. While anecdotal evidence has value, it is a less than reliable measure for analytical purposes. Not all evidence needs to be quantitative. Systematically gathered qualitative evidence such as classroom based research, histories and archival analyses are also appropriate.

Efforts should also be made to reconcile differences in data that may occur when independent studies are undertaken on individual areas of the institution. In multi-college systems, it is of critical importance that system and institutional data be the same and emanate from the same source.

Colleges frequently overlook a wealth of data they have on student outcomes by not coordinating the analysis of data among service areas within the institution. For example, various student services offices have data relevant to academic programs (*e.g.*, comparative success rates, student demographics). Multiple measures for related outcomes can be useful for institutions which serve a broad array of students who have different educational objectives. Transfer rates, general education certification, degree attainment, vocational certification and job placement outcomes can all be used as major educational attainment measures.

Data on more specific measures of progress can also provide a quantitative basis for evaluating effectiveness. For example, rates of students' progression from developmental to regular academic course work, rates of students' progression into courses with skills or content prerequisites, and success rates for students in courses or programs related to specific competencies can be used to document institutional effectiveness.

- What information already exists which will contribute to the analyses?
- Where is it? Who will obtain it?
- What are efficient and effective ways of augmenting effectiveness data?

Documentation. The self-study provides an excellent opportunity to collect data, particularly satisfaction surveys from students and/or staff. However, nothing in the standards nor the Commission Handbook of Accreditation and Policy Manual requires survey data for the self study. In fact, the self study should document the way the institution uses all types of data to evaluate programs and services and to assess effectiveness as a part of the regular operating procedures within the college. There should be clear documentation in the self study of the types of data collected, the purposes for which the data are collected, the criteria used to assess the data, and the role that the assessment plays in program planning, revision, and implementation.

While the self study should include data that supports an assessment of the institution's effectiveness by the visiting team and the Commission, the use of reliable data to support institutional planning and decision-making is a fundamental tool for insuring institutional effectiveness. The self study should describe and evaluate the use of quantitative and qualitative data in the on-going activities of the college.

4. Programs and Services. Colleges and institutions accredited by the Accrediting Commission for Community and Junior Colleges offer educational programs and support services for students. Whether the programmatic mission is narrow or broad, modest or extensive, institutions need to have a systematic means for evaluating program and service effectiveness through such measures as outcomes, progress and success. A process of program review and program plans based upon the outcomes of program review should be in place.

As the standards suggest, articulation is also related to curriculum planning and, therefore, articulation becomes an aspect of program review. Data for these standards are not restricted to transfer rates. Evaluation of the quantity and quality of articulation agreements is relevant. When the various aspects of articulation are placed in the context of the institution's mission, a measure of "institutional effectiveness" can be described and evaluated. A similar assessment can be made for vocational programs in terms of their relevance to job markets.

- What changes have occurred as a result of program reviews and how have those changes been evaluated?
- When was the last review of institutional and program articulation agreements and activities? What use was made of the outcomes?
- What measures do student services, support services, administration and the governing board use to evaluate programs and services?

Documentation: The processes used for the systematic review of programs and support services should be described and evaluated in the self study and reference should be made to the relevant documentation of those reviews.

The outcome measures used in program review should be described and evaluated in terms of the mission of the institution and the students it serves. The focus should be on learning, not simply on providing programs and service.

The relationship between program review and budget planning and implementation should be articulated and evaluated. Consideration of the fiscal implications of the results of program reviews should include short-term budgeting as well as long-term, financial planning for the institution.

ACCJC STANDARDS AND INSTITUTIONAL EFFECTIVENESS

STANDARD ONE: INSTITUTIONAL MISSION

The institution has a statement of mission that defines the institution, its educational purposes, its students, and its place in the higher education community.

1. The institution has a statement of mission, adopted by the governing board, which identifies the broad-based educational purposes it seeks to achieve.

2. The mission statement defines the students the institution intends to serve as well as the parameters under which programs can be offered and resources allocated.

3. Institutional planning and decision making are guided by the mission statement.

4. The institution evaluates and revises its mission statement on a regular basis.

STANDARD THREE: INSTITUTIONAL EFFECTIVENESS

The institution, appropriate to its mission and purposes as a higher education institution, develops and implements a broad-based and integrated system of research, evaluation, and planning to assess institutional effectiveness and uses the results for institutional improvement. The institution identifies institutional outcomes which can be validated by objective evidence.

A. Institutional Research and Evaluation

A.1 Institutional research is integrated with and supportive of institutional planning and evaluation.

A.2 The institution provides the necessary resources for effective research and evaluation.

A.3 The institution has developed and implemented the means for evaluating how well, and in what ways, it accomplishes its mission and purposes.

A.4 The institution provides evidence that its program evaluations lead to improvement of programs and services.

B. Institutional Planning

B.1 The institution defines and publishes its planning processes and involves appropriate segments of the college community in the development of institutional plans.

B.2 The institution defines and integrates its evaluation and planning processes to identify priorities for improvement.

B.3 The institution engages in systematic and integrated educational, financial, physical, and human resources planning and implements changes to improve programs and services.

C Institutional Outcomes Assessment

C.1 The institution specifies intended institutional outcomes and has clear documentation of their achievement.

C.2 The institution uses information from its evaluation and planning activities to communicate matters of quality assurance to the public.

C.3 The institution systematically reviews and modifies, as appropriate, its institutional research efforts, evaluation processes, institutional plans, and planning processes to determine their ongoing utility for assessing institutional effectiveness.

STANDARD FOUR: EDUCATIONAL PROGRAMS

A.4 The institution provides sufficient human, financial, and physical (including technological) resources to support its educational programs and to facilitate achievement of the goals and objectives of those programs regardless of the service location or instructional delivery method.

B.3 The institution identifies and makes public expected learning outcomes for its degree and certificate programs. Students completing programs demonstrate achievement of those stated learning outcomes.

B.5 Students completing degree programs demonstrate competence in the use of language and computation.

C.2 The general education component is based on a philosophy and rationale that are clearly stated. Criteria are provided by which the appropriateness of each course in the general education component is determined.

C.4 Students completing the institution's general education program demonstrate competence in oral and written communication, scientific and quantitative reasoning, and critical analysis/logical thinking.

D.1 The institution has clearly defined processes for establishing and evaluating all of its educational programs. These processes recognize the central role of faculty in developing, implementing, and evaluating the educational programs. Program evaluations are integrated into overall institutional evaluation and planning and are conducted on a regular basis.

D.2 The institution ensures the quality of instruction, academic rigor, and educational effectiveness of all of its courses and programs regardless of service location or instructional delivery method.

D.3 The evaluation of student learning and the award of credit are based upon clearly stated and published criteria. Credit awarded is consistent with student learning and is based upon generally accepted norms or equivalencies.

D.4 The institution has clearly stated transfer of credit policies. In accepting transfer credits to fulfill degree requirements, the institution certifies that the credits accepted, including those for general education, achieve educational objectives comparable to its own courses. Where patterns of transfer between institutions are established, efforts are undertaken to formulate articulation agreements.

D.5 The institution utilizes a range of delivery systems and modes of instruction compatible with the objectives of the curriculum and appropriate to the needs of its students.

D.6 The institution provides evidence that all courses and programs, both credit and non-credit, whether conducted on or off-campus by traditional or non-traditional delivery systems, are designed, approved, administered, and periodically evaluated under established institutional procedures. This provision applies to continuing and community education, contract and other special programs conducted in the name of the institution.

D.7 Institutions offering curricula through electronic delivery systems operate in conformity with applicable Commission policies and statements on Principles of Good Practice in Distance Education.

D.8 Institutions offering curricula in foreign locations to students other than U.S. nationals operate in conformity with applicable Commission policies and guidelines.

STANDARD FIVE: STUDENT SUPPORT AND DEVELOPMENT

3. The institution identifies the educational support needs of its student population and provides appropriate services and programs to address those needs.

4. The institution involves students, as appropriate, in planning and evaluating student support and development services.

5. Admissions and assessment instruments and placement practices are designed to minimize test and other bias and are regularly evaluated to assure effectiveness.

10. The institution systematically evaluates the appropriateness, adequacy, and effectiveness of its student services and uses the results of the evaluation as a basis for improvement.

STANDARD SIX: INFORMATION AND LEARNING RESOURCES

2. Appropriate educational equipment and materials are selected, acquired, organized, and maintained to help fulfill the institution's purposes and support the educational program. Institutional policies and procedures ensure faculty involvement.

5. The institution provides sufficient and consistent financial support for the effective maintenance, security, and improvement of its information and learning resources.

7. The institution plans for and systematically evaluates the adequacy and effectiveness of its learning and information resources and services and makes appropriate changes as necessary.

STANDARD SEVEN: FACULTY AND STAFF

B.1 The evaluation of each category of staff is systematic and conducted at stated intervals. The follow-up of evaluations is formal and timely.

B.2 Evaluation processes seek to assess effectiveness and encourage improvement.

B.3 Criteria for evaluation of faculty include teaching effectiveness, scholarship or other activities appropriate to the area of expertise, and participation in institutional service or other institutional responsibilities.

D.2 The institution regularly assesses and reports its achievement of its employment equity objectives, consistent with the institutional mission.

STANDARD EIGHT: PHYSICAL RESOURCES

4. Selection, maintenance, inventory and replacement of equipment are conducted systematically to support the educational programs and services of the institution.

5. Physical resource planning and evaluation support institutional goals and are linked to other institutional planning and evaluation efforts, including district or system planning

STANDARD NINE: FINANCIAL RESOURCES

A.1 Financial planning supports institutional goals and is linked to other institutional planning efforts.

A.2 Annual and long-range financial planning reflects realistic assessments of resource availability and expenditure requirements. In those institutions which set tuition rates, and which receive a majority of funding from student fees and tuition, charges are reasonable in light of the operating costs, services to be rendered, equipment, and learning resources to be supplied.

A.3 Annual and long-range capital plans support educational objectives and relate to the plan for physical facilities.

A.4 Institutional guidelines and processes for financial planning and budget development are clearly defined and followed.

A.5 Administrators, faculty, and support staff have appropriate opportunities to participate in the development of financial plans and budgets.

B.6 Financial management is regularly evaluated and the results are used to improve the financial management system.

STANDARD 10: GOVERNANCE AND ADMINISTRATION

A.2 The governing board ensures that the educational program is of high quality, is responsible for overseeing the financial health and integrity of the institution, and confirms that institutional practices are consistent with the board-approved institutional mission statement and policies.

A.5 The size, duties, responsibilities, ethical conduct requirements, structure and operating procedures, and processes for assessing the performance of the governing board are clearly defined and published in board policies or by-laws. The board acts in a manner consistent with them.

B.4 Administrative officers are qualified by training and experience to perform their responsibilities and are evaluated systematically and regularly. The duties and responsibilities of institutional administrators are clearly defined and published.

B.8 The institution has written policy which identifies appropriate institutional support for faculty participation in governance and delineates the participation of faculty on appropriate policy, planning, and special purpose bodies.

B.9 The institution clearly states and publicizes the role of staff in institutional governance.

B.10 The institution clearly states and publicizes the role of students in institutional governance.

C.6 The district/system has effective processes in place for the establishment and review of policy, planning, and financial management.

APPENDIX G

ELIGIBILITY REQUIREMENTS FOR ACCREDITATION

(Adopted June, 1995, Revised January, 1996)

Compliance with the requirements is expected to be continuous and will be validated periodically, normally as part of every institutional self study and comprehensive evaluation. Institutions are expected to include in their self study reports information demonstrating that they continue to meet the eligibility requirements.

AUTHORITY

1. The institution is authorized to operate as an educational institution and to award degrees by an appropriate governmental organization or agency as required by each of the jurisdictions or regions in which it operates.

   In California, 94310.3A (or subsequent statute) approval by the California Council for Private Postsecondary and Vocational Education is required for private institutions. The institution shall submit a copy of its articles of incorporation.

MISSION

2. The institution's educational mission is clearly defined, adopted, and published by its governing board consistent with its legal authorization and is appropriate to a degree granting institution of higher education and the constituency it seeks to serve.

GOVERNING BOARD

3. The institution has a functioning governing board responsible for the quality and integrity of the institution and for ensuring that the institution's mission is being carried out. Its membership is sufficient in size and composition to fulfill all board responsibilities.

   The governing board is an independent policy-making body, capable of reflecting constituent and public interest in board activities and decisions. A majority of the board members have no employment, family, or personal financial interest in the institution.

CHIEF EXECUTIVE OFFICER

4. The institution has a chief executive officer who is appointed by the governing board and whose primary responsibility is to the institution.

ADMINISTRATIVE CAPACITY

5. The institution has sufficient staff with appropriate preparation and experience to provide the administrative services necessary to support its mission and purpose.

OPERATIONAL STATUS

6. The institution is operational with students actively pursuing its degree programs.

DEGREES

7. A substantial portion of the institution's educational offerings are programs that lead to degrees, and a significant proportion of its students are enrolled in them.

EDUCATIONAL PROGRAMS

8. The institution's principal degree programs are congruent with its mission, are based on recognized higher education field(s) of study, are of sufficient content and length, and are conducted at levels of quality and rigor appropriate to the degrees offered. At least one degree program must be of two academic years in length.

ACADEMIC CREDIT

9. The institution awards academic credits based on generally accepted practices in degree-granting institutions of higher education. Public institutions governed by statutory or system regulatory requirements should provide appropriate information regarding the award of academic credit.

EDUCATIONAL OBJECTIVES

10. The institution defines and publishes for each program the program's educational objectives for students.

GENERAL EDUCATION

11. The institution defines and incorporates into all of its degree programs a substantial component of general education designed to ensure breadth of knowledge and promote intellectual inquiry. The general education component should include demonstrated competence in writing and computational skills and an introduction to some of the major areas of knowledge. Degree credit for general education programs should be consistent with levels of quality and rigor appropriate to higher education.

FACULTY

12. The institution has a substantial core of qualified faculty with full-time responsibility to the institution and sufficient in size and experience to support all of the institution's educational programs. A clear statement of faculty responsibilities must exist.

STUDENT SERVICES

13. The institution provides for all of its students appropriate student services and development programs consistent with student characteristics and its institutional mission.

ADMISSIONS

14. The institution has adopted and adheres to admission policies consistent with its mission that specify the qualifications of students appropriate for its programs.

INFORMATION AND LEARNING RESOURCES

15. The institution owns or otherwise provides specific long-term access to sufficient information and learning resources and services to support its mission and all of its educational programs.

FINANCIAL RESOURCES

16. The institution documents a funding base, financial resources, and plans for financial development adequate to support its mission and educational programs and to assure financial stability.

FINANCIAL ACCOUNTABILITY

17. The institution regularly undergoes and makes available an external financial audit by a certified public accountant or an audit by an appropriate public agency. The institution shall submit a copy of the current budget and a copy of the current audited financial statement prepared by an outside certified public accountant who has no other relationship to the institution. The audit must be certified and any exceptions explained. It is recommended that the auditor employ as a guide Audits of Colleges and Universities, published by the American Institute of Certified Public Accountants.

INSTITUTIONAL PLANNING AND EVALUATION

18. The institution provides evidence of basic planning for the development of the institution, planning which identifies and integrates plans for academic personnel, learning resources, facilities, and financial development, as well as procedures for program review and institutional improvement.

    The institution engages in systematically evaluating how well and in what ways it is accomplishing its purposes, including assessment of student learning and documentation of institutional effectiveness.

PUBLIC INFORMATION

19. The institution publishes in its catalog or other appropriate places accurate and current information that describes its purposes and objectives, admission requirements and procedures, rules and regulations directly affecting students, programs and courses, degrees offered and the degree requirements, costs and refund policies, grievance procedures, academic credentials of faculty and administrators, and other items relative to attending the institution and withdrawing from it.

RELATIONS WITH THE ACCREDITING COMMISSION

20. The governing board provides assurance that the institution adheres to the eligibility requirements and accreditation standards and policies of the Commission, describes itself in identical terms to all its accrediting agencies, communicates any changes in its accredited status, and agrees to disclose information required by the Commission to carry out its accrediting responsibilities.